DOCUMENT RESUME

ED 203 561 EC 132 843

TITLE In Retrospect 1979-80: Special Education Research.
INSTITUTION Dallas Independent School District, Tex. Dept. of Research and Evaluation.
PUB DATE 80
NOTE 139p.

EDRS PRICE MF01/PC06 Plus Postage.
DESCRIPTORS *Disabilities; Elementary Secondary Education; Emotional Disturbances; Handicap Identification; Hyperactivity; Information Processing; Intervention; *Program Descriptions; *Program Evaluation

ABSTRACT

The document is a composite of final reports written for every special education research and evaluation study conducted in the Dallas (TX) Independent School District during the 1979-80 school year. Each report contains information on program objectives, sampling, design, and outcomes. Three projects were carried out under the Special Education Program Studies: efforts to expand a special education database for administrative management information, a project to evaluate the implementation and operation of the special education program, and evaluation of the district's 1979-80 child find system. Four speical projects are described: two evaluations of KIDS--Kindling Individual Development Systems (early intervention and outreach aspects); technical assistance given to the Hyperkinesis Screening Project; and an evaluation of the Structured Environment for the Emotionally Disturbed. (CL)

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DALLAS INDEPENDENT SCHOOL DISTRICT

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IN RETROSPECT 1979-80
SPECIAL EDUCATION RESEARCH

SPECIAL EDUCATION RESEARCH AND EVALUATION

DEPARTMENT OF RESEARCH AND EVALUATION
DALLAS INDEPENDENT SCHOOL DISTRICT

DALLAS, TEXAS
NOVEMBER 1980

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Importance of Research and Evaluation

We live in a time of accountability, a time when the public wants to know how their money is spent. Whether it be health, business, education, or government, the public is unwilling to support projects without knowing how well a program works and whether it is worth the financial investment.

Administrators, staff, and program participants often have differing views, and decision makers, as well as the public, have difficulty getting an unbiased picture of a program. However, information is needed in order to find effective ways of accomplishing program goals and of judging the worth of on-going procedures and innovative developments.

In recent time research and evaluation have become significant factors in program development, and good evaluation can assure the public and decision makers of access to the information necessary for responsible planning for future needs and for accountability in program organization and administration. Accordingly, the Dallas Independent School District has committed significant resources to research and evaluation in the District's special education program.

Forward

The District's special education program is based on the policies of the Dallas Independent School District and the Texas Education Agency and the provisions of Public Law 94-142. These mandate that every handicapped child shall have a free appropriate public education in the least restrictive environment and each child shall have an individualized education program.

About 10,000 students are served each year in special education, and these range in age from birth to twenty-two years and include a wide variety of handicapping conditions. The special education program offers instructional placement ranging from the regular classroom to special instruction for hospitalized students and special campus placement. The program staff includes about 900 personnel.

In Retrospect 1979-80 is a composite of final reports written for every special education research and evaluation study conducted during the 1979-30 school year. Each report contains comprehensive information and includes program objectives, sampling, design, and outcomes.

Special Education
Program Studies

Dallas Independent School District
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Accountability and Development Division
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THE 1979-80 SPECIAL EDUCATION DATA BASE

SE80-113-31-08

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The 1979-80
Special Education Data Base

Evaluators: Karen Cortell Reisman
Michael A. Holt
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Daniel J. Macy

Objectives of the Program: The basic function of the 1979-80 special education data base was to build onto the existing computer file while continuing to provide information to special education administrators. Variations of student and faculty rosters, current to the week of distribution, were given to special education coordinators, facilitators, diagnosticians, home-school coordinators, psychologists, and speech pathologists corresponding to six-week District reporting periods.

A major objective of the data base was the generation of reports necessary for funding purposes to the Texas Education Agency (TEA) . The TEA Survey Package reported the total number of children between ages 3-5 and ages 6-21 by handicapping condition. The Elementary and Secondary School Civil Rights Survey tallied total special education students by age, instructional arrangement and handicap. Finally, statistical tabulations essential for the Annual Special Education Statistical Report to the TEA were generated by a set of computer routines developed by data base personnel.

The data base was also utilized to provide spontaneous information requested by management. The computer system enabled administrators to be more responsive to such needs, and the types of information requested usually dealt with totals and percentages of special education students in terms of ethnicity, subdistrict, age or handicap. Mailing labels were also computer-generated, which economized on secretarial time when letters were sent to staff or parents.

The Computerized Monitoring and Retrieval (CMR) System was initiated during 1979-80 in order to provide on-line computer storage and retrieval of the dates of student appraisal/placement events. Computer terminals were placed in subdistrict special education offices which enabled immediate access to student information such as dates of reviews, staffings, and medical exams. In addition, selected personnel were able to update and add information on the terminals in order to keep the system current.

Purpose of the Evaluation: The special education data base began in 1975-76 to meet the increasing information needs of both special and regular education administrators. These needs arose from a host of administrative tasks and issues including budget and program planning, federal and state reporting requests, student enrollment and appraisal/placement monitoring, due process procedures, and the need for more precise and accountable management. During its fifth year of operation, the data base continued to provide needed information to designated management.

Sample: The sample for the data base included the special education staff (N=948) and all students who received special education services (N=10,739) during the 1979-80 school year.

Evaluation Design: The information for the data base was gathered by speech pathologists (N=80) and educational diagnosticians, psychologists, and home-school coordinators (N=70). The information collected by these professionals, also known as Responsible Team Members (RTMs), primarily consisted of student demographic data. The information was recorded on forms and sent to a central office on a weekly basis. When a student was added to a special education program the student's name, identification number, school, classroom unit, handicap, and instructional arrangement were recorded. All variables, excluding the name, were written in an alpha or numeric code. The same method was used when a student was dropped or a change was made on the student's record. After the forms were validated, the data were keypunched and entered into the computer file.

The information for the CMR System was recorded by subdistrict administrative clerks (N=10) on Case Management Profile Forms. After the remote terminals were placed in the subdistrict offices, the clerks were able to update directly on the terminal. However, in order to have a back-up file, a manual profile form was maintained on each child throughout the year.

Major Evaluation Questions and Results

1. What information was contained in the data base to meet the needs of special education management?

   Basically, the data base consisted of the four computer files illustrated in Figure 1. The student file, faculty file, and school file contained the demographic data necessary to generate reports to special education faculty and TEA. The Computerized Monitoring and Retrieval System provided on-line access to student appraisal/placement dates.

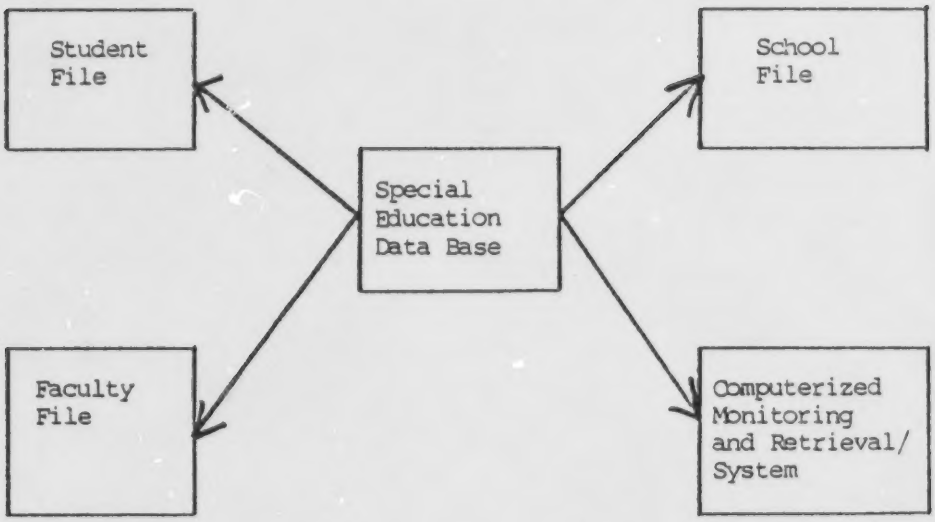

Figure 1: Data Base File Construction

Input for the student file included demography, transportation and address information. The field descriptions for the file are listed below.

1. Student DISD identification number.
2. Student name.
3. Attending school location.
4. Teacher unit number or speech pathologist number.
5. Disposition code.
6. Instructional arrangement code.
7. Primary, secondary, and/or tertiary handicap code.
8. Student services number.
* 9. Home-school location code.
10. Speech problem type.
11. Speech handicap severity rating.
12. Number of speech sessions served.
13. Transportation action code.
14. Date student started, stopped, or restarted transportation.
15. Bus route number.
16. Miles per day traveled.
17. Transportation location code.
18. Transportation funding source.
19. Responsible Team Member number.
20. English level rating.
21. Special flags for students affiliated with Project Zero Reject, Project KIDS, Project SPICY, Project SEED, the Multiple Careers Magnet Center, or the Assessment Center.

*22. Home address.
*23. Phone number.
*24. Grade.
*25. Date of birth.
*26. Sex.
*27. Ethnicity.

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*Data initially retrieved from the District-wide file.

The faculty file included special education administrators, coordinators, facilitators, diagnosticians, home-school coordinators, psychologists, speech pathologists, teachers, and teacher aides. The specifications for the faculty file are as follows:

1. Area location code.
2. Position type code (i.e., psychologist, teacher, etc.).
3. Faculty identification number.
4. School location code.
5. Supervisor identification number.
6. Diagnostician identification number.
7. School grade span.
8. Organizational arrangement code (i.e., DISD or non-DISD campus).
9. Service type code (i.e., resource room, self-contained unit, etc.).
10. Itinerant location codes.

The school file contained a record on DISD schools as well as non-DISD campuses which provided special education services to DISD students. The following data were collected for each school:

1. School TEA budget number.
2. Area location code.
3. School box number.
4. School grade span.

Finally the information on the Computerized Monitoring and Retrieval System contained the following:

1. Dates for PPC (Pupil Personnel Committee) documentation and approval.
2. Date for parent permission of assessment.
3. Date for scheduled assessment.
4. Examination dates (i.e., vision, auditory, psychological, educational, physical, and sociological exams).
5. Dates for scheduled and completion of staffing.
6. Results of staffing (e.g., was the student eligible for special education?).
7. Date of service initiation.
8. Location of service initiation.
9. Dates of area and central ARD (Admission, Review and Dismissal) reviews.
10. Results of reviews (e.g., was ARD Committee in agreement?).
11. Dates of quarterly IEP (Individualized Educational Program) reviews.
12. Date and result of end-of-year review.
13. Notation of possible related services (i.e., physical therapy, audiological services, etc.).

2. What kinds of information were available to decision makers as a result of the 1979-80 data base operations?

   Table 1 categorizes the frequency and types of reports generated on a routine basis. Faculty, student, and transportation rosters were generated every six weeks. Information was reported annually to TEA, and data necessary for the scheduling process were also printed on an annual basis.

   Information from the data base was requested on an ad hoc basis on 142 different occasions during the 1979-80 year. The number of ad hoc requests increased by 58% when compared with the 1978-79 requests (N=90). Table 2 categorizes the frequency and types of data needed by management. It took an average of 2.33 hours to complete any given request. Professionals needing information from the data base ranged from deputy associate superintendents to subdistrict administative clerks. Table 3 delineates the number of times different personnel requested data.

3. How was the information in the data base utilized to meet the needs of special education management?

   Utilization of data base information surrounded several major areas: class scheduling, enrollment projections, ad hoc information requests, and on-going information retrieval. The following summarizes data base utilization in each of these areas during 1979-80.

   A computerized method of class scheduling for the 1980-81 school year was implemented in the summer months. The method, which minimized work time considerably, was executed with the close cooperation of the coordinators and their facilitators.

   A set of programs was updated from the 1978-79 year to project next-year school locations for special education students based upon their neighborhood elementary schools and the District-wide school feeder system. The enrollment projections were designed to help management allocate class units relative to anticipated student enrollments.

   Subdistrict personnel were able to access current information on computer terminals placed in the area offices. Two programs, Tabulator and Inquiry, were specifically designed for users with minimal data processing background. These programs provided accurate and updated statistical and demographic information on the special education population.

   The additional functions of and revisions to the 1979-80 special education data base were:

   1. Increase of professionals reporting data to include all psychologists and home-school coordinators.

Table 1

Types and Frequencies of Routine Data
Reported from the Data Base

Type of Report	Schedule for Generation
Faculty rosters	6 weeks
Student rosters	6 weeks
Transportation rosters	6 weeks
Child Find Report	Monthly
TEA Survey Package	Annually (October)
Elementary and Secondary School Civil Rights Survey	Annually (April)
Annual Special Education Statistical Report to the TEA	Annually (June)
Letters of notification to parents about special class placement and transportation authorization, if applicable	Annually (June)
Computer punch cards of students necessary for class scheduling process	Annually (June)

Table 2

Types and Frequencies of Data
Requested from the Data Base on an Ad Hoc Basis

Types of Information	Number of Times Requested	
	N	%
Student rosters by instruction unit type (e.g., Early Childhood Unit)	20	14.1%
Routine student/faculty rosters at less than 6-weeks intervals	16	11.3%
Mailing labels of faculty and/or students	16	11.3%
Tabulations by handicap and sex, ethnicity, age, grade, or school	16	11.3%
SPSS (Statistical Package for the Social Sciences) frequency tables (e.g., handicap by grade)	11	7.7%
Student rosters by class or subdistrict	11	7.7%
Rosters or tabulations of historical data	10	7.1%
Rosters or tabulations of students receiving transportation	8	5.7%
Student rosters by age or handicap	7	4.9%
Student address rosters	6	4.2%
Summary rosters of speech students	6	4.2%
Tabulations of ethnicity by grade	3	2.1%
Faculty rosters	3	2.1%
Student rosters listed by student services number or ID number	2	1.4%
Miscellaneous reports or tabulations	7	4.9%
Total	142	100%

Table 3

Professionals Requesting Data on an Ad Hoc Basis from the Data Base

Professional Service Type	Number of Data Requests	
	N	%
Central staff (i.e., Deputy Associate Superintendents, Directors, Assistant Directors)	55	38.7%
Research and evaluation staff	42	29.6%
Special education facilitators	12	8.4%
Special education coordinators	9	6.3%
Educational diagnosticians	8	5.7%
Special education teachers	7	5.0%
Administrative clerks	4	2.8%
Speech pathologists	3	2.1%
Occupational/Physical therapists	2	1.4%
Total	142	100%

2. Collection and generation of data for the Multiple Careers Magnet Center.

3. Generation of new software necessary to disseminate:

   a. The Annual Special Education Statistical Report to the TEA.

   b. The class average roster.

   c. Additional transportation reports.

   d. The Computerized Monitoring and Retrieval System.

4. Inclusion of two new handicap codes on the data base: Autism and Multihandicapped.

5. Dissemination of a list comparing transportation location data with special education location data in order to access and correct incompatible information.

6. Revision of the speech rosters to indicate possible handicaps and instructional arrangements in addition to speech-related information.

7. Dissemination of a list of "no shows" to help the RTMs trace students who could still be receiving special education, but were not enrolled.

4. How accurate was the information collected for the data base?

Two validity checks were made on the accuracy of information reported to the data base. A special education teacher was selected in each of the RTM's area of responsibility who confirmed that their class role either paralleled or differed from the computer roster. Each teacher was contacted by telephone and was asked if the students listed on the computer roster were receiving special education services in their classroom. If any adds or drops occurred within the previous two weeks, they were not considered as errors due to the usual two-week buffer period between the time data are collected and reported on the computer file. The sample selected those schools in which there were the least number of classrooms and teachers per school.

Results were compared with findings from 1978-79, as indicated in Table 4. The validity checks revealed that the percentage of total errors slightly decreased during the 1979-80 school year, and was basically comparable to the results from the survey taken in March 1979. Overall, these data indicate that the percentage of errors has not changed across time, despite the fact that the number of professionals reporting data has doubled. In addition, the amount of information processed by the data base has increased by 19% when compared to the number of update transactions processed in 1978-79 (N=16,897). The number of 1979-80 transactions was 20,024.

Table 4

Two-Year Comparison on
Accuracy of Data Base Information

	1978-79				1979-80			
	December		March		December		March	
	N	% error	N	% error	N	% error	N	% error
Teacners Sampled	33	---	60	---	34	---	34	---
Total student population listed on data base for selected teachers	344	---	710	---	371	---	429	---
Total number of students that teachers reported should be added	22	6.4%	15	2.1%	18	4.8%	18	4.2%
Total number of students that teachers reported should be dropped	23	6.6%	39	5.5%	14	3.8%	16	3.7%
Total Error	45	13.0%	54	7.6%	32	8.6%	34	7.9%

[a]Percent error is computed by dividing number of errors by number of students sampled.

5. What were the costs associated with data base operations?

The cost of data base operations was ascertained by dividing the system into five major functions and charting the hour costs utilized to perform each. Table 5 indicates the total number of days spent on each data base function given two computer programmers (one position was vacant for two months), one assistant evalutor, principal evaluator, and secretary. Assignment of cost to each function was achieved by totalling each employee's daily salary multiplied by the number of days utilized for each function.

Keypunch and computer time costs were not included in Table 5, but the cost incurred for keypunching totaled $1,530.00. A previous analysis of the costs of data processing revealed that, at least in a large school district which has computer capability, the costs for computer-prepared individual reports were less than those costs for reports which were manually prepared (Reisman, Holt, Kocsis, and Macy, 1979, p.6).

6. What procedures were developed and implemented for the computerized monitoring of specific services for special education students?

The CMR System evolved out of special education management's need for current student appraisal information. During 1979-80, all special education records were moved from the administration building to subdistrict offices. An integral part of this decentralizing process was to have data readily accessible on area terminals.

The planning phase for the CMR System has spanned several years, and a design proposed during the 1977-78 year specified seven remote terminals. However, budget limitations precluded further development until 1979-80. In January 1980 seven cathode ray terminals and couplers were purchased, along with three portable data terminals.

At the start of the 1979-80 school year, the area administrative clerks were given an orientation to the CMR System. They were instructed to record all information on case management profile forms as students began the special education process. By the end of December each subdistrict had initiated approximately 500 profile forms which documented the information for the CMR System.

The pilot implementation of the CMR System began in the Southeast Subdistrict. Before placing the terminal in the area office, data from the CMR forms were entered on the computer by data base personnel. After a training session, the clerks updated and accessed information directly on the terminal.

Table 5

Data Base Cost Analysis[a]

Data Base Function	Total of Days Utilized by Staff	Total Cost	Percent Total Cost
New software development[b]	121	$12,710.50	27.3%
Data collection and system maintenance	186	$12,299.85	26.5%
Special projects[c]	98	$ 9,123.00	19.6%
Routine report generation	100	$ 8,221.90	17.7%
Ad Hoc report generation	43	$ 4,118.60	8.9%
Total	548	$46,473.85	100%

[a]Cost figures do not include computer time.

[b]New software was developed for the Annual Statistical Report, the CMR System, the Child Find Report, the transporation system, and for data base improvements.

[c]Special projects included the class scheduling process and the development of an enrollment projection system.

Once the system was operational in the Southeast Subdistrict, terminals were placed in the other area offices using the procedure described above. Following a staggered implementation schedule, each subdistrict received a terminal after the system was functioning in a previous subdistrict. In addition, terminals were placed in the Child Find office and the Special Funds Acquisition and Monitoring office located at the central administration building.

Overall, 3,953 student profiles were added to the CMR System during 1979-80. The System was accessed 213 times by the 15 users. Each user had an assigned security code in order to keep the information confidential. While all users could access data, only specific personnel had security numbers which allowed updating. This procedure ensured that data manipulation would be restricted to selected personnel.

7. What contingency plans, if any, were developed for data base expansion?

While the current data base represents a significant contribution to managerial needs of special education, additional computer applications have been planned for development in 1980-81. Modifications include the following:

1. An on-line transportation system utilizing terminals in subdistrict offices.

2. Collection of data identifying severely and profoundly handicapped students.

3. Generation and dissemination of summary statistics of student appraisal/placement events as reported on the CMR System.

4. Revision of routine report dissemination time schedule in order to avoid conflicts with District-wide reporting schedules.

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Dallas Independent School District
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CONTEXT EVALUATION OF THE 1979-80 SPECIAL EDUCATION PROGRAM

SE80-114-31-80

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Dallas, Texas
October 1980

Context Evaluation of the 1979-80 Special Education Program

Evaluator: Daniel J. Macy

Objectives of the Program: The Dallas Independent School District's special education program attempts to provide appropriate education for every exceptional child. Special education makes use of a continuum of instructional arrangements which range from complete regular classroom instruction to total self-contained instruction in a special campus setting. The program attempts to provide individualized instruction for each student.

Purpose of the Evaluation: The evaluation conducted was a limited context evaluation of the implementation and operation of the special education program. As such, the evaluation yielded only basic information about program operation. Limited comparisons were made with results from previous years.

Sample: The sample included the total student population served in special education. Enrollment data for the total District came from the system-wide student data base at the end of the second quarter of the year.

Evaluation Design: The evaluation used a simple one-shot observational design, and the time of data collection was June 15, 1980. The data source was the special education computerized data base which is maintained by special education staff and Research and Evaluation personnel.

Major Evaluation Questions and Results

1. How many students were served in special education?

   A total of 10,739 students were served in the special education program.

2. How did the number of students served compare to previous years and to national estimates of incidence?

   The number of students served in special education was 8.2% of the 1979-80 total District population. Table 1 presents these data for the past five years.

Table 1

Number and Percent of Students
Served in Special Education
During Five Consecutive Years

Year	Number	Percent	Percent[a] Adjusted
1975-76	8,250	5.67	-
1976-77	8,051	5.78	5.53
1977-78	9,244	6.84	6.35
1978-79	10,238	7.70	7.04
1979-80	10,739	8.20	7.38

[a]Computed for the 1975-76 total District enrollment of 145,503 students, since total District enrollment has decreased over the past five years.

The data reported in Table 1 indicate increasing enrollment in special education. This trend is encouraging since the percent served in 1975-76 was below the expected incidence levels. The Bureau of Education for the Handicapped in the former U. S. Office of Education estimated that a minimum of 10.04% of school-age children were handicapped, and Public Law 94-142 cited an incidence rate of 12%. However, survey data reported by the Council of Greater City Schools indicated an average incidence rate of about seven percent for handicapped children in large-city schools.

Comparison of the percent served to a standard incidence figure is important because it is one of the primary methods of ascertaining whether the District is providing a free, appropriate education to all handicapped students, as legally mandated by Public Law 94-142. When considering a student population as large as the District's, even one-half a percentage point involves several hundred students (e.g., 652, based on the 1979-80 enrollment).

One unfortunate problem in attempting to evaluate the special education incidence rate in the District is the absence of any commonly accepted standard. Therefore, one can only compare the District's incidence rate to those rates previously mentioned and perhaps conclude that the District's special education program served the expected number of children. However, results of analyses of incidence rates by individual subdistricts failed to support this conclusion.

Table 2 presents the number of special education students as well as the percent of the total subdistrict population served in special education during 1978-79 and 1979-80. Inspection of Table 2 shows that in two subdistricts, East Oak Cliff and Southeast, the incidence rates were markedly different than the remainder of the District for both years.

In the East Oak Cliff Subdistrict, the percent served (5.8) was below any of the expected incidence levels discussed previously. If one assumes that the actual incidence of handicaps is the same in all subdistricts, then one would expect there to be several hundred (and possibly up to one thousand, if one accepts a 10% incidence rate) handicapped students in the East Oak Cliff Subdistrict who were not served in the special education program during 1979-80. If so, the extent to which these children received a free, appropriate education (as mandated by Public Law 94-142) is not known. The data strongly suggest that there are handicapped children in that subdistrict who are not receiving special education services, and this raises a number of questions regarding the implementation of the major provisions of Public Law 94-142 (such as an individualized education program and least restrictive environment) for handicapped children in the East Oak Cliff Subdistrict.

Table 2

Number and Percent of Students
Served in Special Education by Subdistrict
in 1978-70 and 1979-80

Subdistrict	1978-79		1979-80	
	N	%	N	%
Northwest	2,019	6.9	2,118	7.4
Northeast	1,753	6.6	1,085	7.8
Southwest	1,964	7.1	2,074	7.3
East Oak Cliff	1,270	4.8	1,480	5.8
Southeast[a]	2,031	9.4	2,210	10.2

[a]Includes Seagoville subdistrict

The incidence rate for the Southeast and Seagoville Subdistricts, on the other hand, was higher than the other subdistricts and more closely approximated the expected number of handicapped students. It may be advisable to study the appraisal/placement process within these two subdistricts to determine what procedures, if any, differ and how this information might improve delivery of service in other subdistricts.

2. How did the percent of ethnic representation in special education compare to total District ethnic percent?

The above question is critically important because historically many children from different racial groups have been placed inappropriately in special education (Hilliard, 1980). The best estimate of the expected representation of racial groups in special eudcation is the representation in the total population, since there is no a priori reason to expect any particular group to have a greater incidence of handicapping conditions.

Tables 3, 4, and 5 present these comparisons for five consecutive years beginning with 1975-76 and running through 1979-80. These data show that ethnic representation was generally in agreement between both regular and special education student populations, but there was a tendency toward overrepresentation of White elementary students in special education across the five-year period. Similarly, there was a tendency toward underrepresentation of Black, and, to a lesser extent, Hispanic elementary students in special education. This trend was presumably due, at least in part, to the lower special education incidence rate in the East Oak Cliff Subdistrict, which includes a predominantly Black student population.

One should note that the pattern of ethnic representation observed in the elementary student population was different from that in the secondary population. There was a tendency toward overrepresentation of Black secondary students in special education during 1975-76 and 1976-77, but this overrepresentation was almost nonexistent during 1977-78, 1978-79, and 1979-80 (see Table 4). The tendency toward underrepresentation of Hispanic secondary students was similar to that of elementary students.

The ethnic representation for all students in the special education program was comparable to that of the total District (Table 5). The overrepresentation of Whites (by an average of 4.2%) in special education was not as pronounced as for the elementary student population because of the counterbalancing effect of ethnic representation among secondary students.

Table 3

Percent Ethnic Representation for Elementary Students in Special Education and the Total District During Five Consecutive Years[a]

Year	Population	Racial Group			
		Black	Hispanic	Other	White
1975-76	Total District	46	15	1	38
	Special Education	41	13	<1	46
1976-77	Total District	48	17	1	34
	Special Education	42	13	1	45
1977-78	Total Ditrict	49	18	1	32
	Special Education	43	14	1	42
1978-79	Total District	49	19	1	31
	Special Education	43	16	1	41
1979-80	Total District	49	21	1	29
	Special Education	44	16	1	39

[a] Data from the first four years are from the evaluation reports listed in the Additional Information section of this report.

Table 4

Percent Ethnic Representation for Secondary Students in Special Education and the Total District During Five Consecutive Years[a]

Year	Population	Ethnicity			
		Black	Hispanic	Other	White
1975-76	Total District	44	10	1	45
	Special Education	51	8	1	41
1976-77	Total District	46	11	1	42
	Special Education	50	8	1	41
1977-78	Total District	47	12	1	40
	Special Education	49	9	1	41
1978-79	Total District	49	13	1	37
	Special Educaion	52	9	1	38
1979-80	Total District	50	14	1	35
	Special Education	53	10	<1	37

[a] Data for the first four years are from the evaluation reports listed in the Additional Information section of this report.

Table 5

Percent Ethnic Representation for all Students in Special Education and the Total District During Five Consecutive Years[a]

Year	Population	Ethnicity			
		Black	Hispanic	Other	White
1975-76	Total District	45	13	1	41
	Special Education	45	11	< 1	44
1976-77	Total District	47	14	1	38
	Special Education	45	11	1	43
1977-78	Total District	48	15	1	36
	Special Education	45	12	1	42
1978-79	Total District	49	16	1	33
	Special Education	46	13	1	40
1979-80	Total District	49	18	1	32
	Special Education	47	14	1	38

[a] Data for the first four years are from evaluation reports listed in the Additional Information section of this report.

4. What was the profile of the total special education population in terms of sex, grade, and primary handicap?

Tables 6 through 9 present profiles of the special education population in terms of the above variables. These tables include data for several consecutive years (1973-1980 or 1975-1980). Population totals may not agree across Tables 6 through 9 due to missing data for selected variables.

Inspection of Table 6 shows that male students are overrepresented in special education, since the District population is only about 50% male, and the special education population is more than 60% male. The ratio of males to females in special education was stable across a five-year period, and the observed disproportionate representation of male students is not uncommon among special education programs. The above data do raise the question of possible sex discrimination in the referral and placement of students in special education, and further study is needed to determine the relationship between gender and incidence of handicapping conditions.

Table 7 indicates that over 60% of the special population was enrolled in grade six or under during each of the past five years. The large proportion of students served in grade three and under was due to speech and language handicaps in which intervention typically began in the first or second grade.

Special education services should begin as early as possible in order to realize maximum benefits, and thus the proportion of students served in the early grades and prekindergarten level is important. When speech students were excluded, analysis of the 1975-76 population showed that a small proportion of students (11%) was enrolled in special educaton prior to the fourth grade (Macy, 1976). Similar analysis of the 1979-80 population revealed that the proportion of special education students who began receiving services prior to the fourth grade was 19%. This improvement is substantial and noteworthy and presumably represents some of the impact of the District's child find efforts and its early intervention program, Project KIDS, as well as reduced age limitations for program eligibility.

Table 8 presents data for special students in terms of primary handicapping condition for the three predominant handicap categories: mental retardation, learning disability, and speech. The data indicate that these handicaps typically account for slightly more than two-thirds of the special education enrollment. There is a downward trend in the proportion of the special population whose primary handicap is mental retardation, which may be due to increases in total special education enrollment. The dramatic change in the proportion of learning disabled students from 1977-78 to 1978-79 was due to the deletion of the minimal-brain-injured category by the Texas Education Agency. Many of these students were reclassified as learning disabled.

Table 6

Percent Male and Female Representation
in the Special Education Population

Year	Sex		Total N[a]
	Male	Female	
1975-76	63%	37%	8,250
1976-77	62	38	8,296
1977-78	64	36	9,244
1978-79	63	37	10,238
1979-80	64	36	10,739

[a]Population totals may not agree with Tables 7, 8, and 9 due to missing data.

Table 7

Composition of Special Education Population
by Grade Level

Year	Grade				Total N
	3 and under	4-6	7-8	9-12	
1975-76	37%	26%	14%	23%	7,706
1976-77	32	29	15	24	6,493
1977-78	40	26	14	20	8,721
1978-79	40	25	15	20	10,056
1979-80	38	25	15	22	10,568

Table 8

Composition of the Special Education Population by Primary Handicap

Year	Handicap				Total[b] N
	Mental Retardation	Learning Disability	Speech	Other[a]	
1973-74	28%	19%	29%	24%	8,641
1974-75	25	22	29	24	8,375
1975-76	28	17	27	28	7,817
1976-77	25	14	32	29	7,688
1977-78	22	18	29	31	8,884
1978-79	21	30	29	20	9,809
1979-80	19	29	28	24	10,254

[a]Includes handicaps in areas of vision, hearing, orthopedic, health, and emotion, and minimal brain injured prior to 1978-79.

[b]Totals do not agree with Table 1 due to exclusion of students served in the program for expectant mothers.

Table 9 gives a breakdown of the 1979-80 special education population by each handicap category. Results were consistent with expectations.

The special education program also provides special instruction for pregnant students, and Table 10 reports the number of students served in special education for the past seven years (1973-1980). These data indicate a trend toward increased enrollments in the special program for expectant mothers since 1977-78, which may lead to improved prenatal care and child rearing practices.

Table 9

Composition of the 1979-80
Special Education Population by Primary Handicap

Handicap	Percent	N
Learning disabled	28.6	2,929
Speech impaired	27.5	2,818
Mentally retarded	19.1	1,962
Orthopedic, other health	7.0	721
Emotionally disturbed	6.8	698
Multihandicapped [a]	5.8	595
Hearing impaired	4.2	434
Visually impaired	0.8	77
Deaf/blind	0.2	20
Total	100.0	10,254[b]

[a]At least two handicapping conditions and the primary handicap was other than mental retardation.

[b]The total is less than 10,739 due to exclusion of students seved in the program for expectant mothers.

Table 10

Number of Expectant Mothers Who Attended
Metropolitan Special

1973-74	1974-75	1975-76	1976-77	1977-78	1978-79	1979-80
552	451	433	363	360	429	485

5. How many students were dismissed?

The total number of students dismissed from special education during 1979-80 was 1,716, which was 16.0% of the total served. Over the past four years, the percentages dismissed have been 21.6 (1976-77), 15.7 (1977-78), 17.6 (1978-79), and 16.0 (1979-80).

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Dallas Independent School District
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EVALUATION OF THE 1979-80 CHILD FIND SYSTEM

SE80-115-31-08

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Dallas, Texas
October 1980

Evaluation of the 1979-80 Child Find System

Evaluators: Deborah F. C. Gilliam and Alberta M. Rogers

Objectives of the Program: During the 1978-79 school year, the child find system was integrated into normal District operating procedures and was supported by local funds. The child find system, now in its fifth year (1979-80), sought to continue efforts toward refining a model system for locating out-of-school and unserved handicapped children in a large urban setting, and for monitoring these children from identification through placement.

Project activity during 1979-80 placed greatest emphasis on the child find effort itself and on the provision of services to the located population. Seek-and-find activities continued with the utilization of the project's 24-hour telephone answering service as well as the use of a central administrative screening committee to achieve efficient routing of project referrals. Project staff continued to maintain contact with various human service agencies throughout the metroplex through on-site visits and the dissemination of printed materials to the agencies. The project further continued the development and maintenance of a computerized information system at the local level for monitoring the placement process and for long-range planning.

Purpose of the Evaluation: The evaluation of the child find system sought to provide a year-end follow-up of referrals received; to assess efforts in locating the unserved, handicapped population; and to document the continued development of referral procedures.

Sample: The sample included the population of children who were referred to the District child find office during the period of July 1, 1979, through May 30, 1980. The sample was composed of 221 children referred to the project during that time period.

Evaluation Design: Data were obtained from information compiled by project staff on the Project Zero Reject Intake Worksheet at the time of referral to the child find office. Additional data were obtained from the project's computerized information system.

The evaluation focused on child identification methodologies, referral demographic data, and the procurement of services (placement) for the located population. Comparisons of general trends noted on selected aspects of the project during its first four years and the 1979-80 school year are also reported.

Major Evaluation Questions and Results

1. Who were the agents making referrals to the child find office?

   The major referral agents noted during the 1979-80 school year were parents, DISD school personnel and various community agencies, all of which accounted for nearly three-fourths of the 221 referrals received. The data show that these three sources (parents, DISD school personnel and agencies) have consistently been the major referral agents throughout the five-year span (1975-80) of the project. On the average, more than 80% of the referrals received each year were attributed to these sources. The tabulation of 1979-1980 referral sources is presented in Table 1.

2. What demographic information described the referral population?

   Approximately 97% (N=214) of the 221 referrals received during 1979-80 were from the targeted population of out-of-school and unserved, handicapped children. On the average, about 88% of the referrals received each year were from the target population. The data show that the project has been markedly consistent from one year to the next in locating the intended population. The remaining three percent of the referrals received during the 1979-80 school year were from persons living outside of the DISD boundaries.

   Data in terms of the age distribution of the 221 referrals were markedly consistent with data obtained in this area during previous years of the project. The early childhood group accounted for the majority of the referrals, as nearly two-thirds of the children referred were between three and five years of age. Over 90% of the referrals were children at or below the elementary school level. On the average, over three-fourths of the referrals received each year have been children at or below the elementary school level, with over one-half of the children being between three and five years of age.

Table 1

Tabulation of Child Find Referral Sources
1979-1980

Referral Source	N		Percent
Parents	66		29.9
Agencies	54		24.4
Public health nurse	18	33.3	
Community clinic	17	31.5	
Public welfare caseworker	16	29.6	
MHMR centers	3	5.6	
DISD school personnel	43		19.4
Hospital	34		15.4
Physician	5		2.3
Other family members	4		1.8
Medical school	4		1.8
Day care center	3		1.4
Region X	3		1.4
Neighbor, friend	1		.4
Other	4		1.8
	221		100.0

In terms of gender and ethnicity, the referrals reflected the expected proportions. About 64% (N=141) of the referrals were males. About 42% (N=93) were White, another 38% (N=83) were Black, 19% (N=43) were Hispanic and one percent (N=2) was American Indian and other. The male population has consistently appeared to be overrepresented throughout the span of the project, but the observed percentages of males (60%, 57%, 66%, 64% and 64% for each consecutive year) have been consistent with typical male incidence rates in special education programs. Ethnic proportions of the referrals throughout the five years of the project have shown a reasonable degree of consistency with District ethnic percentages.

The referral data are further defined in terms of the handicapping conditions for those children who had received some type of placement as of May 30, 1980. Of the 151 (68%) referrals whose placement had been determined as of May 30, 1980, almost all were children with moderate to severe handicapping problems. The most frequently reported handicap in both the 1979-80 and 1978-79 school years was language/learning disability. During the first three years (1975-78) of the project, mental retardation (primarily trainable) was the most frequently reported handicap. Mental retardation (primarily educable) was the second most frequently reported handicap during 1979-80 and 1978-79.

3. What time lines were noted in procuring services for the target population?

Placement was established for more than two-thirds of the 221 children referred. In 1978-79, about 43% of the population referred were placed, while about 40% of the referral population were placed during the 1977-78 school year. During the first and second year of the project (1975-76 and 1976-77), placement was established for approximately 38% and 58% of the children referred, respectively. As of May 30, 1980, the remaining referrals (approximately 32%) had either been deferred or remained in the appraisal process. Table 2 shows the distribution of referral placement decisions.

Those children who were placed waited an average of 16 weeks from the time of referral to placement. During 1978-79, the average length of time from referral to placement was 15 weeks. The previous year (1977-78), the average amount of time from referral to placement was 13 weeks. During the first and second year (1975-76 and 1976-77) of the project, the average lengths of time from referral to placement were 8.1 weeks and 10 weeks, respectively. The data indicate an increase in the average amount of time from referral to placement from one year to the next.

Table 2

Tabulation of 1979-80
Referral Placement Decisions
as of May 30, 1980

Placement Decision	N	Percent
Placed	151	68.3
DISD Special Education	105	69.5
Contract	2	1.3
Hospital/Homebound	1	.7
Moved (before placement)	13	8.6
Ineligible	13	8.6
Refused service	10	6.6
Private school	2	1.3
Deceased	1	.7
Other	4	2.7
In Process	70	31.7
	221	100.0

For those incomplete cases, the average time for case reviews was 3.6 weeks while the average amount of time between case reviews and May 30, 1980, was 14.8 weeks. Data obtained in this area tend to vary from one year to the next.

Table 3 provides a summary of general trends noted on selected aspects of child find referral data. The information has been previously discussed in the body of the report, but this table provides greater synthesis of the data, as well as ease of comparison over the five years of implementation. Note that all third-year data (1977-78) exclude the 94 MHMR referrals that resulted from the closing of one of their facilities. The data represent only the major findings within each category.

Table 3

Child Find Five-Year Trends

Year	Number Referrals Received	Major Referral Sources (Percent)	Percent Placed/ Placement Intervals	Percent From Target Population[a]	Percent Pre-school (Age)
1975-76 (Jan. to June 30)	106	Parents (41.5) DISD (7.5) Agencies (34.1)	37.5 (N=33) 8.1 weeks	83.0 (N=88)	(0-2) 11.4 (3-5) 31.8
1976-77 (July 1-June 30)	226	Parents (25.3) DISD 13.7) Agencies (36.3)	57.5 (N=130) 10 weeks	82.7 (N=187)	(0-2) 4.9 (3-5) 51.3
1977-78 (July 1-June 30)	160 (254 including 94 MHMR referrals)	Parents (36.9) DISD (19.5) Agencies (32.6)	63.8 (N=102) 13 weeks	93.7 (N=150)	(0-2) 3.1 (3-5) 73.1
1978-79 (July 1-May 30)	187	Parents (33.2) DISD (19.8) Agencies (28.3)	43.3 (N=81) 14.9 weeks	90.4 (N=169)	(0-2) 24.6 (3-5) 56.2
1979-80 (July 1-May 30)	221	Parents (29.9) DISD (19.4) Agencies (24.4).	68.3 (N=151) 15.9 weeks	96.8 (N=214)	(0-2) 26.7 (3-5) 62.4

[a] Out of school, unserved handicapped children

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THE EVALUATION OF THE 1979-80 IMPLEMENTATION OF THE KIDS MODEL PROGRAM

SE80-116-31-08

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Dallas, Texas
October 1980

The Evaluation of the 1979-1980 KIDS Model Program Implementation

Evaluators: Margaret E. Mullen, Deborah F. Carpenter Gilliam and Alberta M. Rogers

Objectives of the Program: The KIDS (Kindling Individual Development Systems) Program was developed by Dallas Independent School District personnel for handicapped infants, toddlers, and preschool children, and their families under a grant from the Bureau for the Education of the Handicapped in the U. S. Office of Education. At the conclusion of the three-year federal funding cycle, in September 1978, the District adopted the KIDS service delivery model for all Early Childhood classrooms. In addition, the District continued funding services to handicapped children aged birth to three years, although services for these children are not mandated by state or federal legislation.

The administration and organization of the model is built around three groups: children, parents, and staff. The materials used in the program include the KIDS Inventory of Development Checklist, accompanying curricular activities, which are reflected on MAPs (Mini-Activity Plans), the Parent Self-Appraisal Inventory (PSAI), and accompanying programmed activities for parents.

The major objectives were:

1. To improve development or function of children in the identified area or areas of delay.

2. To provide a continuum of education from a home setting to a school setting for handicapped children and their parents.

3. To deliver instructional services through the cooperative efforts of project staff and parents through home visits, infant stimulation classes, or public school Early Childhood classes.

Purpose of the Evaluation: The evaluation of the Project KIDS program focused on two major areas. First, the evaluation sought to provide a year-end report of children served, and to assess the children's gains over the course of intervention. Second, this evaluation sought to investigate the impact of the program components based on parent participation, and teacher and parent reaction.

Sample: The sample included the population of students who were placed by District Admission, Review, and Dismissal (ARD) committees in a home-based training program, infant stimulation (center-based) classes, or Early Childhood classes. Also included were the children's parents and teachers. The population was composed of 381 children, their parents, and 47 teachers. Teachers were divided into two groups: "original" teachers who had taught Early Childhood classes during the developmental years of the program, and "new" teachers who began teaching Early Childhood classes once the program was established in 1978-79. The parent samples consisted of the 57 parents who participated in the parenting component and the 57 parents who responded to the reaction questionnaire. Table 1 presents the number of sites, teachers and students for each instructional setting.

Table 1

Total Number of Sites, Teachers, and
Students in the Three Instructional Settings
Implementing the Project KIDS Model Program 1979-80[a]

Settings	N of Sites	N of Teachers	N of Students
Home-based	N/A	4	24
Center-based	3	3	36
Early Childhood	32	41	321
Total	35	46[b]	381

[a]Computed as of May 30, 1980

[b]Two of the teachers served both home-based and center-based students, and were counted only once

Evaluation Design: Throughout the year, demographic data were maintained on all students served using the District's computerized Special Education data base. Process evaluation data were collected using the Social-Emotional Climate Index developed by Withall (1949). Administration of the Social-Emotional Climate Index also included the completion of a brief activity record. Observations began at all schools at 8:40 a.m. Observations began at this time to reduce the possibility of poor climate due to teacher or student fatigue. Another reason for these morning observations was that all classrooms were engaged in learning activities at this time. During later hours, activities began to vary more toward lunch, snack, and nap times. In an effort to gather data regarding reliability, eight of the classrooms were observed

three times over two occasions. On one occasion, two investigators observed simultaneously to gather data on inter-judge reliability. One of these investigators returned the next day and re-administered the survey. These two surveys were then compared to ascertain test-retest reliability and inter-judge reliability. Analyses confirmed the reliability of the instrument when used by different observers as well as its reliability over time.

Product evaluation was conducted using the fall and spring (1979-1980) administrations of the KIDS Inventory of Development as pretest and posttest measures. The relationship between student progress, as measured by the KIDS Inventory, and selected student specific variables such as handicapping condition and degree of developmental delay was examined using multiple regression analysis. The conclusions were drawn from an interpretation of the coefficients, arrived at by a step-wise multiple regression technique, and the standard tests of significance.

All parents of children participating in the program were contacted once in September 1979 and invited to participate in the parenting component. The 57 parents indicating an interest in participating in the parenting program were administered the PSAI at least once during the school year. A sample of the 57 parents participating in the parenting program was contacted near the end of the year to canvass reactions specific to the parenting program. All parents were contacted at the same time to assess parent reaction to the overall program. During May 1980, a reaction questionnaire was administered to teachers and other professionals in the program.

Data were also maintained regarding the placement status of home- and center-based graduates.

Major Evaluation Questions and Results

1. What demographic characteristics described the students served in the home-training, infant stimulation and Early Childhood classes?

   A total of 381 children received services in the three instructional settings during the 1979-80 school year. The largest number of students (N=321) received instruction in the 42 school-based Early Childhood classes. Twenty-four children were served in their homes, and 36 received instruction in center-based infant stimulation classes.

   Student demographic information is presented by instructional setting in Tables 2 and 3. The majority of the children were male (231 or 60.6%). This proportion has remained stable every year since the project's inception. The proportion of students by ethnicity was comparable to District enrollment in the Special Education program with 40.1% Black, 39.9% White, 17.1% Hispanic, and 2.9% other. The most frequently reported handicapping condition for students in Early Childhood classes was language/learning disabled. There was little difference in

Table 2

Demographic Data For Students Served
During 1979-1980

Instructional Arrangement	Sex		Ethnicity				Age (Years)							Total
	Male	Female	White	Black	Hispanic	Other	0	1	2	3	4	5	6	
Home-based	15	9	4	9	5	6	4	6	9	5	0	0	0	24
Center based (Infant stimulation)	14	22	19	9	4	4	3	13	17	2	0	0	1	36
School-based (Early Childhood)	202	119	129	135	56	1	0	0	0	72	123	81	45	321
Total	231	150	152	153	65	11	7	19	26	79	123	81	46	381
Percent	60.6	39.4	39.9	40.1	17.1	2.9	1.8	5.0	6.8	20.7	32.3	21.3	12.1	100.0

[a]Under one year of age.

Table 3

Frequencies of Children by Handicapping Condition Within Each Instructional Setting

Handicapping Condition	Instructional Setting			
	Home-Based	Center-Based	Early Childhood	Total
Vision Impaired	2	11	2	15
Orthopedic	1	0	31	32
Other Health Impairment[a]	3	0	41	44
Educable Mental Retardation	0	0	61	61
Trainable Mental Retardation	0	3	24	27
Emotionally Disturbed	0	0	10	10
Language/Learning Disabled	0	0	130	130
Not Assigned[b]	18	22	22	62
TOTAL	24	36	321	381

[a]Other Health Impairments included cerebral palsy, microcephaly, hydrocephaly, genetic syndromes other than Down's, selected motor syndromes, hypotonia, immunological disorders, and endocrine syndromes.

[b]Students younger than 3 years of age were not generally assigned handicap codes.

the ages of home-based and center-based students. While the home-based program was designed for children under two years of age, some older children were staffed into the home-based program due to extenuating circumstances, such as lack of transportation or severity of the handicap.

The frequencies of children served each year since Project KIDS began implementation are summarized in Table 4. During the fourth year of implementation (1978-79) 15 Early Childhood Special Education classes began implementing the KIDS model, and 20 additional classes began implementation during 1979-80, which accounted for the dramatic increase in the number of children served during those years.

2. What were the needs reported by parents on a self-appraisal inventory?

Several changes occurred in the procedural design of the parenting component of the Project KIDS model program to accommodate an increasingly large population of children and their parents. To reach as many parents as possible, teachers were utilized as liaisons with parents for Project KIDS during the 1978-1979 school year. Teachers contacted parents, explained the program, solicited participation and administered the Parent Self-Appraisal Inventory (PSAI). Results of this procedure were less than satisfactory due to the limited amount of time teachers were able to devote to this aspect of the program.

For the school year 1979-1980, procedures were changed to facilitate enrolling parents in the program. Plans for the parenting component of the program called for the solicitation of parent participation through letters sent in November and January. Parents who indicated a desire to participate were administered PSAIs, and activities were planned for them which corresponded to their responses on the PSAI.

A total of 57 parents responded to the invitation to participate in the parenting component. The PSAI asked parents to rate their competency in each of four areas: knowledge of child development, knowledge of handicapping conditions, ability to work with the child, and understanding family interpersonal dynamics. The areas in which parents expressed least competency were determining the child's readiness to learn new concepts, and providing activities for the child. Overall, parents rated themselves quite favorably on the twelve items of the PSAI. Parents assigned the most favorable rating of "1" ("this is a strong area") about 49% of the time, while assigning "good" to "average" ratings 34% and 15% of the time, respectively. Tabulations and percentage of responses for each item are presented in Table 5.

Table 4

Frequencies of Children Served Each Year (1975-1980)
by Instructional Setting

Service Year	Total N	Instructional Setting			Number New to the program this year	Number continuing this year
		Home-Based	Center-Based	School-Based		
First Year (1975-76)	13	8	5	0[a]	13	
Second Year (1976-77)	93	30	13	50	80	13
Third Year (1977-78)	128	36	22	70	80	48
Fourth Year (1978-79)	338	44	17	277	280	58
Fifth Year (1979-80)	381	24	36	321	289	92
TOTALS	953	142	93	718	742	211

[a]One school-based class was operated for a few months during the first year, but these students were not included in the total since the limited amount of time did not allow for full implementation.

Table 5

Tabulation and Percentage of PSAI Responses
(N=57)

PSAI Item	Strong Area		Good Area		Average Area	
	N	%	N	%	N	%
1. Know how to play or work with the child.	20	35	22	39	15	26
2. Am aware of my own feelings about the child's special needs.	34	61	18	32	4	7
3. Can see the child as someone special and valuable	49	86	6	11	2	3
4. Can build the child's self-concept.	27	47	20	35	10	18
5. Can find help or special services for the child.	27	48	25	45	4	7
6. Can give the child chances to learn and discover new things.	29	51	19	33	9	16
7. Can think of things for the child to do which match the child's abilities.	24	42	18	32	15	26
8. Can tell when the child is ready to learn something new.	20	35	20	35	17	30
9. Can work with other members of the family in the care and education of the child.	31	54	18	32	8	14
10. Can teach the child skills in daily living such as dressing, eating, toilet training and grooming.	29	51	22	39	6	10
11. Can give the child a good place and time for learning things.	28	49	21	37	8	14
12. Can see my own good points.	23	41	26	46	7	13

Total scores on the Inventory seemed to reflect the same trend toward favorable self-assessment. The distribution of total scores, which ranged from a score of 12, the most favorable score, to 36, was heavily skewed toward the most favorable one-third of the range. This indicated that parents tended to assign themselves favorable ratings across all twelve items. Fifty-six percent of the parents (N=32) ranked themselves in the most favorable one-third of the scoring range. Another 42% of the parents ranked themselves in the middle one-third of the scoring range, indicating some knowledge of the four areas as well as a desire to learn more. One parent (2%) ranked herself in the lowest one-third of the range, indicating a desire for further training in all areas.

3. What preferences did parents exhibit in selecting activities for their individualized training programs?

A Spearman rank-order correlation computed on PSAI item responses and the number of parent activities chosen per item revealed a significant positive relationship (r=.99), indicating that areas in which parents felt least competent were also areas in which they chose the most activities. Areas in which parents rated themselves as needing the most assistance were those dealing with the parent's ability in assessing their child's readiness. Skill in finding and making up activities which matched the child's abilities was ranked next. Parents next rated themselves as needing help in building the child's self-concept. Those rankings which followed, dealing with family cooperation and home learning environment, ranked equally, covering positions six and seven. Areas ranked in the lower one-third were those dealing with the parents' competency and feelings toward their children. A comparison of rankings of PSAI areas and preferred activities is presented in Table 6.

Parents were allowed ample leeway in choosing activities. They were asked to choose about five activities which reflected their self-ratings on the PSAI. When these item rankings were compared with areas of preferred activities, rankings matched in six of the twelve areas. Areas in which discrepancies were noted were the four most highly ranked areas and the two lowest ranked areas. No discrepancy was larger than 1.5 ranks. Based on the parents' degree of involvement, these discrepancies were not considered significant.

4. What was the reaction of parents to the parenting program?

From the 57 parents choosing to participate in the parenting component, a sample of 18 was randomly selected for a telephone survey. Not all remembered having had contact with the parenting staff. Four parents (28.6%) reported that the only contact that they had with the parenting staff occurred when they completed PSAIs. Other parents reported regular and frequent contacts with the parenting staff, with one reporting as many as 36 contacts.

Table 6

Comparison of Rankings of PSAI Items in which Parents Feel They Need Improvement with Areas in which Activities were Preferred

PSAI Items	PSAI Items N Responses	PSAI Items Rank	Activity Areas N Responses	Activity Areas Rank
1. Can tell when the child is ready to learn something new.	17	1	29	3
2. Know how to play or work with the child.	15	2.5	27	4
3. Can think of things for the child to do which match the child's abilities.	15	2.5	35	1
4. Can build the child's self-concept.	10	4	33	2
5. Can give the child chances to learn and discover new things.	9	5	21	6
6. Can work with other members of the family in the care and education of the child.	8	6.5	21	6
7. Can give the child a good place and time for learning things.	8	6.5	21	6
8. Can see my own good points.	7	8	20	8
9. Can teach the child skills in daily living such as dressing, eating, toilet training-ing and grooming.	6	9	19	9
10. Can find help or special services for valuable.	4	10.5	9	12
11. Am aware of my own feelings about the child's special needs.	4	10.5	14	10
12. Can see the child as someone special and valuable.	2	12	10	11

Ten parents (71.4%) felt that they could "just call" on the parenting staff if they needed help. Three parents (21.4%) stated that they had actually called the parenting staff. Other parents reported that they preferred to contact the teacher for help rather than the parenting staff. All those parents calling for help reported that both teachers and the parenting staff were quite helpful. Four parents (28.6%) reported either that they did not feel free to call the parenting staff, or that they did not know that the parenting staff was available.

5. What was the reaction of parents to the KIDS model?

During April 1980, a Parent Reaction Questionnaire was mailed to the parents of the 381 children participating in Project KIDS. Of those questionnaires mailed, many were returned to the sender. Sixty (15.7%) parents returned the questionnaire. Three parents stated that their child was no longer in the program or had never been a participant, and therefore did not complete the questionnaire. Hence, the findings reported here are based on responses to 57 Parent Reaction Questionnaires, or (those returned to sender were not included in this computation) 19% of all families contacted.

Response to this survey was strictly voluntary and no contacts were made to promote response once the initial contact had been made. Therefore, the responding sample may not be entirely representative of the population.

Responses to the reaction questionnaire indicated that the terms "Project KIDS" and "MAPS" were unfamiliar to parents (see Table 7). Their responses to the questions appeared to be reactions toward District Early Childhood programs rather than Project KIDS per se. Despite this lack of familiarity with the program, parents' reactions were quite positive toward the services which their children received. Parents felt that their children had made significant gains, and also felt that school personnel provided valuable support to parents. Recommendations as to the improvement of services included the addition of bilingual teachers, improved transportation, and an increase in related services.

6. What was the reaction of participating professionals to the KIDS model?

To investigate this question, surveys were sent to the seven "original" teachers who had been implementing the program since 1976-77. Responses of teachers implementing the model during subsequent school years were discussed in a separate report (Gilliam and Rogers, 1980).

Table 7

Responses to the Parent Reaction Questionnaire
(N=57)

Questionnaire Items Referring to:		Response Categories				
		Yes	Think So	Don't Know	Don't Think So	No
Qualifications of Staff, communication between Staff & Parents	%	69.5	18.3	6.7	1.8	3.6
Parent Understanding of Program	%	64.6	20.1	4.8	1.9	8.6
Appropriateness of Program	%	45.4	27.3	19.2	1.0	7.2
Understanding of the Child's Evaluation	%	77.2	10.7	3.3	2.8	6.0
Satisfaction with Program	%	74.8	10.8	5.9	1.8	6.8
Meeting Family Needs	%	51.7	23.3	1.7	1.7	16.7

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Four of the seven teachers contacted responded to the survey. Since all teachers contacted did not respond, it is possible that the responses of those teachers returning the survey do reflect some bias. All were generally pleased with the program, stating that the professional opportunities and experiences had been valuable to them. Suggestions for program improvement included revision of the KIDS Inventory of Devlopment, provision of additional related service therapists, and expansion of the parenting component. With regard to technical assistance, teachers indicated that they had little or no technical assistance during the 1979-80 school year.

7. What differences were there, if any, between the climate of original teachers' classrooms and the climate of new teachers' classrooms?

Results of the classroom climate survey indicated that the climates in both new and experienced teachers' classrooms were supportive of students and conducive to skill development. All analyses were based on 27 observations, each of which was a completed, two-part classroom climate survey. The observers were eight professionals from the Research and Evaluation staff with varying degrees of familiarity with and expertise in Early Childhood education. Part I of the survey was a tally of teacher statements made during a twenty-minute period. During Part II, a record was kept of individual and group activities during a second twenty-minute period. A brief summary of the Social-Emotional Climate Index categories is presented in Table 8. In the cases of both original teachers and new teachers, the proportion of learner-oriented statements (categories 1 and 2) was about double that of teacher-oriented statements (categories 4, 5, and 6), indicating that attention was centered on the students' experiences in the classroom.

To investigate possible differences between classes of original teachers and those of newer teachers, a one-way analysis of variance was performed. The independent variable was teacher status (original or new) and the dependent variables were the six categories of the Climate Index. Of the categories compared, only category 5, reproving statements, demonstrated a significant difference. This analysis indicated that new teachers made significantly more reproving statements than original teachers ($p < .01$). Furthermore, there were no significant differences between teacher groups in the occurrence of learner-oriented and teacher-oriented statements. The summary of this analysis is presented in Table 9.

Table 8

Numbers, Means, and Percentages of Statements Made
In Each Category of the Social-Emotional Climate Index
By Original and New Project KIDS Teachers

Group		Statement Categories: Commendatory	Clarifying-Structuring	Neutral	Directive	Reproving	Teacher - Supportive	Group Totals
Original Project KIDS Classrooms (12 observations)	%	19.9	29.9	26.9	22.0	1.3	0.0	100.0
	N[a]	375	563	508	415	25	0	1886
	$\bar{X}$	31.2	46.9	42.3	34.6	2.1	0.0	157.1
New Project KIDS Classrooms (15 observations)	%	15.4	32.6	25.4	21.6	4.2	0.8	100.0
	N	425	904	703	597	117	22	2768
	$\bar{X}$	28.3	60.3	46.9	39.8	7.8	1.5	184.6
Category Totals	%	17.2	31.5	26.0	21.7	3.0	0.5	100.0
	N	800	1467	1211	1012	142	22	4654
	$\bar{X}$	29.6	54.3	44.8	37.5	5.3	.8	172.4

[a]N = number of statements recorded

Table 9

ANOVA Summary of Number of Reproving Statements Made by Original and New Project KIDS Teachers

	SS	df	MS	f
Between	217.87	1	217.87	10.95*
Within	497.31	25	19.89	
Total	715.18	26		

*p <.01

During Part II of the survey, group activities were observed in all classrooms on all observation visits. Individual activities were observed in all classrooms, but during only 21 of the total 27 visits. On the average per classroom, four students participated in supervised group activities for just over 14 minutes out of a 20-minute observation period. Individual activities lasted for about 11 1/2 minutes and typically involved students supervised alternately by the teacher. When the data were grouped according to total group and individual instruction time, the average child received 11.4 minutes of group instruction and 2.3 minutes of individual instruction per twenty-minute period. There was no significant difference between original classrooms and new classrooms with regard to group and individual instruction time. The number of children receiving individual and group instruction in original and new classrooms is presented in Table 10. There was also no significant difference between classrooms with aides and those without aides. The frequency of children receiving individual and group instruction in classes with and without teacher aides is presented in Table 11.

The items used to assess student-teacher rapport, classroom management, and the physical setting of the classroom each had four rating choices: "poor," "needs improvement," "good," and "excellent." The most frequently occurring rating of student-teacher rapport and classroom managment for all teachers was that of "good." In the cases of both original teachers and new teachers the actual mean rating was between "good" and "excellent." The physical settings of original teachers' classrooms were also rated as being between "good" and "excellent" (X = 3.34), while those of newer teachers were rated as being between "needs improvement" and "good" (X = 2.64).

Table 10

Numbers of Children Receiving Group and Individual Instruction in Original and New Classrooms

Type of Instruction	Teacher Group	Average Instruction Time		Minutes of Instruction				
				0	1-5	6-10	11-5	16-20
Group	Original	11.29	N	0	6	15	20	10
			%	0	11.8	29.4	39.2	19.6
	New[b]	11.44	N	9	16	9	8	29
			%	12.7		22.5	12.7	11.3
Individual	Original	2.19	N	28	17	8	1	0
			%	51.8		31.5	14.8	1.9
	New	2.43	N	42	16	6	5	0
			%	60.9		23.2	8.7	7.2

[a]Began program implementation during 1976-79

[b]Began program implementation during 1978-79 and 1979-80

Table 11

Number of Children Receiving Individual and Group Instruction in Classrooms With and Without Teacher Aides

Type of Instruction	Teacher Group	Average Instruction Time	N	Minutes of Instruction 0	1-5	6-10	11-5	16-20
Group	Aide	11.54	N	2	8	20	16	27
			%	2.7	11.0	27.4	21.9	37.0
	No Aide	8.75	N	10	16	5	12	17
			%	16.7	26.7	8.3	20.0	28.3
Individual	Aide	1.95	N	44	18	8	3	0
			%	60.3	24.6	11.0	4.1	0
	No Aid	1.35	N	32	19	6	3	0
			%	53.3	31.7	10.0	5.0	0

Project KIDS materials were observed in two of the twelve classrooms. While KIDS materials were not typically observed in the classrooms, activities observed did represent the four major areas of the KIDS Model (gross motor, fine motor, cognitive language, and self-care). Most heavily represented among the four areas were cognitive-language and fine motor skills. A tabulation of the activities observed is presented in Table 12.

Table 12

Numbers of Activities Observed Which Pertained to the Four Areas of the KIDS Model

	Activity Area				
	Gross Motor	Fine Motor	Cognitive/ Language	Self Care	Total
N of Activities	11	38	36	8	93
% of Total	11.8	40.9	38.7	8.60	100.00

8. What were the observed improvements, if any, in the areas of developmental delay?

Home-based, center-based, and Early Childhood students were observed to have made significant gains in all areas.

While a total of 381 children were served during 1979-80, complete pretest and posttest performance scores were recorded for 197 children (51.7%). This percentage of complete scores occurred because the special education population tends to be small during the early part of the school year. During the fall and early spring, many children are enrolled so that the population is largest during March and April. A total of 211 children were tested during September 1979, and by May 1980, a total of 381 children had been tested. For the sake of accuracy in computing scores, those children with missing data on any subscale were deleted, resulting in a final sample of 163 children. A summary of sample demographic characteristics are presented in Tables 13 and 14.

The largest group of sampled students in the home- and center-based settings was male (57.7%) and White (57.7%). In the Early Childhood setting, the majority of the children were female (57.7%) and Black (46.0%). While girls were

overrepresented in comparison to the population of Project KIDS students, the ethnic makeup of the sample was quite similar to the total population.

The mean chronological ages at pretest and posttest for students served in the home-based setting were 24.03 months and 30.8 months, respectively. The average interval between pretest and posttest (duration of intervention) was 6.8 months.

Over the course of intervention, home-based students made a mean gain in competency of 5.4 items across all subscales. Mean item gains for each of the four subscales were: (a) Gross Motor, 5.9 items; (b) Fine motor, 4.8; (c) Cognitive/Language, 7.1; and (e) Self Care, 4.0. When converted to estimated developmental age (EDA) scores, the average gains on the four subscales were: (a) Gross Motor, 3.8 months; (b) Fine Motor, 2.9 months; (c) Cognitive/Language, 3.0 months; and (d) Self Care, 2.5 months. Tables 15 through 17 present mean raw scores and EDA's for the pretest and posttest administrations of the KIDS Inventory for the three instructional settings. Tests of significance performed on the mean pretest and posttest items passed in each subscale revealed that gains in all areas were greater than would be expected by chance ($p < .05$).

The mean chronological ages at pretest and posttest for center-based students were 25.9 months and 33.9 months, respectively. The mean duration of intervention for these children was 8.0 months. Mean gain in the number of items mastered across subscales was 8.8 items with an age equivalent of 7.4 months. Mean items gained in each of the four subscales were: (a) Gross Motor, 7.7; (b) Fine Motor, 7.3; (c) Cognitive/Language, 9.9; and (d) Self Care, 10.3. The EDAs of these scores were: (a) Gross Motor, 6.4 months; (b) Fine Motor, 6.3 months; (c) Cognitive/Language, 6.8 months; and (d) Self Care, 10.2 months. Tests of significance performed on the mean number of items passed on pretest and posttest administrations of the Inventory indicated that the gains achieved in all areas were greater than would be expected by chance ($p < .05$).

The mean duration of intervention for students served in District Early Childhood classes was 7.6 months. Mean chronological ages at pretest and posttest were 58.3 months and 65.8 months, respectively. Over the course of intervention, Early Childhood students achieved an average gain of 8.8 Inventory items, representing a mean EDA gain of 9.4 months in each area. The mean items gained on each of the four subscales were: (a) Gross Motor, 6.0; (b) Fine Motor, 7.9; (c) Cognitive/Language, 15.1; and (d) Self Care, 6.4. The mean EDAs of these scores were: (a) Gross Motor, 8.4 months; (b) Fine Motor, 12.4 months: (c) Cognitive/Language, 7.1 months; and (d) Self Care, 9.6 months. Gains in all areas were found to be greater than expected by chance when tested using a for significance.

Table 13

Demographic Data for Pretest-Posttest Sample
1979-1980

Instructional Arrangement	Sex		Ethnicity				Total
	Male	Female	White	Black	Hispanic	Other	
Home- and Center-Based	15	11	15	7	3	1	26
Early Childhood	58	79	48	63	25	1	137
Total	73	90	63	70	28	2	163
Percent	44.8	55.2	38.7	42.9	17.2	1.2	100.0

Table 14

Summary of Handicapping Conditions of
Children in the Pretest-Posttest Sample
1979-80

Handicap	Home Based		Center Based		Early Childhood		Total	
	N	%	N	%	N	%	N	%
Orthopedic	3	18.8			9	6.5	12	7.4
Other Health Impairment	3	18.8	3	30.0	21	15.3	27	16.6
Educable MR					23	16.8	23	14.1
Trainable MR	2	12.5	3	30.0	12	8.7	17	10.4
Emotionally Disturbed					4	2.9	4	2.5
Language/ Learning Disabled	8	50.0	4	40.0	60	43.7	72	44.2
Speech					8	5.8	8	4.9
Total	16	100.0	10	100.0	137	100.0	163	100.0

Table 15

Mean Items Passed, Estimated Developmental Ages (EDA), and Gain Scores for Home-Based Students on the September 1979 and May 1980 Administrations of the KIDS Inventory of Development (N=16)[a]

Inventory Subscale	Pretest		Posttest		Gain	
	Mean N Items Passed	Mean EDA[b]	Mean N Items Passed	Mean EDA	Mean N Items Passed	Mean EDA
Gross Motor	34.1	14.8	40.0	19.7	5.9	4.8
Fine Motor	25.4	12.3	30.2	15.5	4.8	3.2
Cognitive/ Language	29.0	11.0	36.1	15.0	7.1	4.0
Self Care	19.2	16.0	23.1	19.5	3.9	3.5
Mean Across Subscales	26.9	13.5	32.3	17.4	5.4	3.9
Mean Chronological Age		24.0		30.8		6.8

[a]Those students lacking pretest or posttest records were excluded from computations.

[b]Age equivalents are expressed in months.

Table 16

Mean Items Passed, Estimated Developmental Ages (EDA), and Gain Scores for Center-Based Students on the September 1979 and May 1980 Administrations of the KIDS Inventory of Development (N=11)[a]

Inventory Subscale	Pretest		Posttest		Gain	
	Mean N Items Passed	Mean EDA[b]	Mean N Items Passed	Mean EDA	Mean N Items Passed	Mean EDA
Gross Motor	39.6	19.2	47.4	26.6	7.7	7.4
Fine Motor	31.8	16.7	39.1	22.7	7.3	6.0
Cognitive/ Language	38.1	15.5	48.0	22.4	9.9	7.0
Self Care	22.0	17.0	32.3	28.4	10.3	11.4
Mean Across Subscales	32.9	17.1	41.7	25.0	8.8	7.9
Mean Chronological Age		25.9		33.9		8.0

[a]Those students lacking pretest or posttest records were excluded from computations.

[b]Age equivalents are expressed in months.

Table 17

Mean Items Passed, Estimated Developmental Ages (EDA), and Gain Scores for Early Childhood Students on the September 1979 and May 1980 Administrations of the KIDS Inventory of Development (N=138)[a]

Inventory Subscale	Pretest		Posttest		Gain	
	Mean N Items Passed	Mean EDA[b]	Mean N Items Passed	Mean EDA	Mean N Items Passed	Mean EDA
Gross Motor	60.1	43.3	66.0	52.7	5.9	9.4
Fine Motor	51.2	39.9	59.1	52.6	7.9	12.7
Cognitive/ Language	70.8	38.9	85.9	50.3	15.1	11.4
Self Care	49.0	45.8	55.4	55.4	6.4	9.6
Mean Across Subscales	57.8	42.0	66.6	52.8	8.8	9.6
Mean Chronological Age		58.3		65.8		7.6

[a]Those students lacking pretest or posttest records were excluded from computations.

[b]Age equivalents are expressed in months.

months; (b) Fine Motor, 12.4 months; (c) Cognitive/Language, 7.1 months; and (d) Self Care, 9.6 months. Gains in all areas were found to be greater than expected by chance when tested using a for significance.

9. What factors, if any, were identified that contributed most strongly to improvement in developmental progress?

Developmental progress, when measured on the KIDS Inventory of Development Checklist, for students in programs utilizing the KIDS model was generally independent of students' age, sex, ethnicity or instructional location. These and other variables were chosen for investigation because of accepted relevance to developmental progress and practicality. The relationship between selected independent variables and the posttest scores from the spring 1980 administration of the KIDS Inventory was examined using multiple regression analyses. Only those variables explored which demonstrated a strong or unique contribution to the level of progress were retained. Characteristics of the students which did evidence a strong relationship with developmental progress were level of development within each scale of the KIDS Inventory and type of handicapping condition. Surprisingly, interacting variables such as degree of developmental delay or sex and ethnicity by handicap did not seemingly contribute to the degree of developmental progress. Regression results for school-based students are presented in Table 18.

The small sample of home- and center-based students precluded any meaningful statistical analysis of factors contributing to student development. Upon subjective examination of student pretest and posttest scores, students whose handicaps were evidenced through orthopedic impairment or restricted mobility appeared to make less progress on the gross motor, fine motor and self-care scales than students whose handicaps were evidenced by impairment of intellectual functioning. On the cognitive/language scale, students appeared to show progress independent of handicapping condition. As would be expected, gains seemed to be greater for students receiving intervention for longer lengths of time as measured by the interval between pretest and posttest.

Characteristics of students in Early Childhood classes which emerged from the study as factors relating to developmental progress were developmental level and handicap. Age appeared to be a factor contributing to progress in the area of gross motor development. Students who remained in Early Childhood classrooms beyond the age of five years generally were those with less mobility which could explain the negative relationship between age and developmental progress. Again, as expected, students whose handicaps were evidenced by lack of muscle tone or control of extremities progressed at a lower rate than those students whose handicaps included impaired intellectual functioning or delayed speech acquisition. One of the more interesting results of the study was the lack of a strong relationship between handicap and gross motor development.

Table 18

Regression Results for Early Childhood Students from the KIDS Inventory of Development for Selected Concomitant Variables (N=137)

Variables	Scales			
	Gross Motor	Fine Motor	Cognitive/ Language	Self-Care
Pretest				
B	.942*	.816*	.864*	.792*
p^2	.846*	.722*	.761*	.694*
Age				
B	-.105*	.017	.007	.016
p^2	.010*	.000	.000	.000
Handicap				
B	.056	.107*	.071	.158*
p^2	.003	.010*	.005	.022*
Interval				
B	.051	-.027	.061	.012
p^2	.002	.001	.003	.000
Sub-District				
B	.017	.026	.104*	-.076
p^2	.000	.000	.006	.007
Sex				
B	-.047	-.005	-.010	.092
p^2	.002	.000	.000	.007
Ethnicity				
B	.022	.004	.053	.069
p^2	.000	.000	.003	.004
R^2	.864	.734	.778	.735
F	115.91*	59.40*	63.97*	50.60*

*(P .05)
B = weight
p^2 = Squared part correlation; absolute increment in explained variation of the dependent variable due to the addition of this variable to the equation
R^2 = Variation in dependent variable explained by combination of independent variables
F = Ratio calculated with 6 and 129 degrees of freedom

This seemed to substantiate results from the teacher interviews which indicated that teachers felt they lacked the space, time and equipment to implement properly the appropriate gross motor activities suggested by the KIDS curriculum. Progress in the cognitive/language area was related in this study to the geographical area in which the students classroom was located.

In considering the results of the analyses of student progress two factors should be noted. First, the KIDS Inventory of Development Checklist was designed in accordance with accepted theory of the development of non-handicapped children and therefore may not reflect, to the fullest extent, the behavioral changes in handicapped children. Second, the possibility exists that changes measured by the KIDS inventory may be related to maturation or other agents external to the intervention provided. However, the comparison of activities observed in the classroom to the developmental changes in the students indicated that the greater changes occurred in those developmental areas which received the most attention in the various settings.

10. With what success were students provided a smooth transition from one instructional setting to another?

Table 20 presents the disposition of May 1979 graduates at each of four follow-up points during 1979-1980. A child was considered successfully placed if residing within the DISD and attending an Early Childhood class or some other special education program, or if the child was staffed but the guardian declined the services. The percent of successful placements was computed as the ratio of graduates successfully placed to the total number of graduates known to be in the District.

Of the 21 children graduating from the 1978-79 home- and center-based instructional settings, three (14%) began attending Early Childhood classes in August 1979. As of October 31, 1979, an additional four graduates (19%) were attending Early Childhood classes, one child (5%) was attending a private program, and five children (24%) were known to be no longer within the Dallas Independent School District. The rate of successful placements at this time was 50%.

Follow-up in January 1980 revealed that the rate of successful placement had increased to 68%. The number of home- and center-based graduates attending Early Childhood classes had risen to nine (43%). Five more students (24%) had been staffed to Early Childhood classes but were not attending for several reasons, including lack of necessary transportation, lack of notification to parents and school, or the refusal of services by the guardian. One student was still awaiting staffing.

Table 20

Percent of May 1979 Graduates Accounted for
at Four Follow-up Points
(N=21)

Disposition	August 1979	October 1979	January 1980	April 1980
Awaiting Staffing	85.7	38.1	4.8	
Staffed to Early childhood, not attending[a]			19.0	4.8
Attending Early Childhood	14.3	33.3	42.8	52.4
Attending other special education program		4.8	4.8	9.5
Staffed, guardian refused services			4.8	4.8
No longer in District		23.8	23.8	28.6
Percent successfully placed	14.3	50.0	68.7	93.3

[a]Reasons for non-attendance include lack of transportation or lack of notification to guardian or school.

By April 1980, the placement success rate had reached almost 100%, with five of the six students not previously accounted for enrolled in classes. Two children were receiving transportation and were attending Early Childhood classes. Still another child had been staffed and was attending class at a District Developmental Center. One child was known to have left the District, and, as mentioned, one guardian had refused placement. Finally, one child was assigned to an Early Childhood class but did not enroll.

These placement success rates indicated that the transition from home- and center-based settings was far from smooth. Most of those children making the transition were unaccounted for until after mid-year. In general, the failure to provide for a smooth transition appeared to be a result of the lack of coordination among the departments of Special Education, the department of Student Services and the county transportation system.

Of the 34 students graduating from the 1979-80 home- and center-based instructional settings in May 1980, 21 were staffed to District Early Childhood classes for fall 1980. The dispositions of the remaining 13 students were as follows: (a) referred to a District developmental center, 7 students; (b) moved from the District, 3 students; (c) referred to another program, 1 student; (d) not eligible for Early Childhood special education, 1 student; and (e) case pending, 1 student.

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Dallas Independent School District
Linus Wright, General Superintendent

Accountability and Development Division
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PROCESS EVALUATION OF THE 1979-80 PROJECT KIDS OUTREACH

SE80-117-31-08

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Dallas, Texas
October 1980

Process Evaluation of the 1979-80 Project KIDS Outreach (Kindling Individual Development Systems)

Evaluators: Deborah F. C. Gilliam and Alberta M. Rogers

Objectives of the Program: Project KIDS Outreach is a second-year program which was designed to increase the number of quality programs for young handicapped children through replication of the Project KIDS model training, demonstration and dissemination activities. Project KIDS is a DISD model home-to-school transition program for handicapped infants, toddlers, preschool children and their families. The Outreach program, which is financially supported by the Bureau for the Education of the Handicapped in the U. S. Office of Education, is part of a nationwide network of early childhood projects for the handicapped. The three potential service delivery program settings include a home-based training program for infants (0-24 months), a center-based training program for toddlers (24-36 months), and a school-based early childhood program for pre-schoolers (36-60 months). The KIDS Outreach component concentrated service delivery efforts on the school-based early childhood population (three- to five-year-olds). The support systems provided to each setting included an appraisal/curriculum, staff development, parent involvement and program evaluation component.

The objectives of the project applied to several levels which included the following:

Local Level

1. Replicate all or a portion of the Project KIDS program components in a minimum of five additional sites in the Dallas Independent School District.

Regional Level

2. Continue replication of the selected program components of Project KIDS in the three regional school districts served during 1978-79 (Duncanville, Grand Prairie, and Lancaster).

3. Replicate all or a portion of the Project KIDS program components in a minimum of two additional sites in the area served by Education Service Center, Region X.

4. Conduct demonstration and information-sharing activities to increase public awareness of the program model and of the importance of early intervention.

State Level

5. Participate in the Triple T Consortium (Teaching Texas Tots), a statewide organization for projects that serve handicapped infants, to promote and encourage permissive legislation for handicapped infants zero to three years of age.

Nalional Level

6. Distribute Project KIDS dissemination packages in appraisal, curriculum, staff development, parent involvement, and evaluation to other early childhood programs, public and private schools, and regional service centers to facilitate the development of quality programs.

Participation in KIDS Outreach by regional school districts was decided by local school option. The Education Service Center, Region X, advised regional districts of the availability of KIDS Outreach, and these districts opted to participate in Outreach in accordance with their needs.

Original 1979-80 project objectives and budget called for replication of the KIDS model components in a minimum of five additional sites in the Dallas ISD and a minimum of two additional districts in Region X. KIDS Outreach implementation in the Dallas ISD included 34 sites in contrast to the minimum of five initially specified, while the commitment to two regional sites was realized. Programmatic need and philosophy supported the expansive intradistrict implementation of Outreach, but such implementation did decrease resources available per site and increased implementation difficulties.

Purpose of the Evaluation: The evaluation sought to monitor the implementation process of the KIDS model program at each replication site. The monitoring activities were expected to provide feedback to the project replication specialists and management in order to facilitate program implementation through modification and adaptation of selected components to each individual site. Monitoring activities were also expected to result in the documentation of the degree of program implementation at each replication site and the reaction of professional participants to selected components of the model program.

Evaluation activities were also expected to assess the degree to which program materials were disseminated at the local, regional and national levels through the sale of prepared packets of Project KIDS materials and through demonstration activities of project staff.

Sample: The student sample included the population of students served in local and regional Outreach during the 1979-80 school year. The population consisted of 363 students.

The teacher population was composed of the 45 teachers (34 local, 11 regional) involved in the KIDS Outreach program during the 1979-80 school year.

The regional program personnel sample included special education program directors and supporting staff in five regional sites. The population consisted of 11 program personnel that participated in second-year Outreach activities.

The population of product users included those 112 individuals and organizations who had previously ordered Project KIDS dissemination products.

Evaluation Design: The model implementation study was conducted near mid-year with a random sample of Outreach teachers and again near the end of the year with all Outreach teachers. Project reaction data (from teachers) were obtained near the end of the school year. Model implementaton data were obtained via personal interviews and teachers' records, while reaction data were obtained through a mail-out questionnaire.

Project reaction data were obtained from nine regional program personnel (administrators and supporting staff) near the end of the school year. The regional program personnel responded to a mail-out questionnaire.

The project staff's calendar of activities during 1979-80 provided information regarding demonstration/dissemination activities of the project. At mid-year, the users of the project's dissemination products were contacted via a mail-out questionnaire. Other data regarding project implementation were obtained from project records as needed throughout the year with the Special Education Data Base providing demographic data on students served locally. Data collection activities are illustrated in Table 1.

Major Evaluation Questions and Results

1. What demographic characteristics described the students served in the program?

   The project served 363 children (255 local, 108 regional) during the 1979-80 school year. The majority of the students served were male (about 63%) and White (about 55%). The ages of the students served ranged from three to fourteen years with the majority (about 83%) being three to five years old. The most frequently reported handicaps of students served in local Outreach (DISD) and regional Outreach were language/learning disability and mental retardation, respectively. Language/learning disability was the most frequently reported handicap of students served across the program during 1979-80. Table 2 shows demographic data on the students served in Outreach during the 1979-80 school year.

2. Which components of the KIDS program did Outreach sites select for replication?

   During the second year (1979-80) of implementation, 34 classrooms within the Dallas Independent School District and 11

Table 1

Project KIDS Outreach 1979-80
Data Collection Activities

Sampling Scheme	Resulting Sample Size	Procedure	Instrument	Description	Time of Collection
112 dissemination product users 1978-1980	26	Mail-out questionnaire	Dissemination Product User Questionnaire	Assess users' perceptions of usefulness and value of dissemination products	January 7, 1980
Random sample of 16 Outreach teachers	16	Classroom observations, interviews, reviews of records	Model Implementation Questionnaire (mid-year)	Determine extent of model implementation	January 10-25, 1980
45 Outreach teachers	31	Mail-out questionnaire	Participant Reaction Questionnaire	Determine reactions to technical assistance, staff development and the model program components	May 5, 1980
11 regional program participants	9	Mail-out questionnaire	Participant Reaction Questionnaire	Determine reactions to technical assistance, staff development and the model program components	May 5, 1980
45 Outreach teachers	43	Classroom observations, interviews, reviews of records	Model Implementation Questionnaire (end-of-year)	Determine extent of model implementation	May 12-28, 1980

Table 2

Demographic Data For All Students Served In
Project KIDS Outreach During 1979-80

Replication Site		Sex		Ethnicity				Age (Yrs.)									Total
		Male	Female	White	Black	Hispanic	Other	3	4	5	6	7	8	9	10	11	
Dallas ISD Sites[a]	N	159	96	105	98	50	2	62	101	60	25	7	0	0	0	0	255
	%	62.4	37.6	41.2	38.4	19.6	.8	24.3	39.6	23.5	9.8	2.8	0.0	0.0	0.0	0.0	100.0
Regional Site No.	1	21	10	28	2	1	0	9	11	3	0	3	1	2	1	1	31
Regional Site No.	2	23	10	26	2	5	0	9	11	11	1	1	0	0	0	0	33
Regional Site No.	3	11	6	16	0	0	1	5	3	4	0	0	0	1	1	3	17
Regional Site No.	4	8	5	10	3	0	0	1	3	2	5	2	0	0	0	0	13
Regional Site No.	5	8	6	13	1	0	0	1	2	4	4	2	1	0	0	0	14
Total	N	71	37	93	8	6	1	25	30	24	10	8	2	3	2	4	108
	%	65.7	34.3	86.1	7.4	5.6	.9	23.2	27.8	22.2	9.3	7.4	1.8	2.8	1.8	3.7	100.0
Total	N	230	133	198	106	56	3	87	131	84	35	15	2	3	2	4	363
	%	63.4	36.6	54.6	29.2	15.4	.8	24.0	36.1	23.1	9.6	4.1	.6	.8	.6	1.1	100.0

[a]Note that the DISD sites are composed of 34 classrooms

classrooms within the Duncanville, Grand Prairie, and Lancaster Independent School Districts, and the Collin County and Tri-County Special Education Co-ops were involved in the Project KIDS Outreach program. The Outreach participants concentrated their service delivery efforts on the school-based early childhood population of three- to five-year-old students. The support systems provided to five of the six school districts included appraisal, curriculum, staff development, parent involvement and evaluation. One school district selected only the appraisal/curriculum and staff development components.

Table 3 provides a summary of the extent of program implementation for selected major components of the KIDS model.

Table 3

Extent of Project KIDS Model Implementation
in Local and Regional Outreach Classrooms

Model Components	Percent Implementing (N=43)
1. Administering KIDS Inventory of Development Scale to students in program	100
a. Inventories current	98
2. Sending MAPs (Mini-Activity Plans) home for parents to assist in instruction	67
3. Charting student activities with the MAPs	46
4. Charts of student progress	44
5. Individualized student folders	100
a. Currently assigned MAPs in folder	58
6. IEPs for each student	100
7. Learning centers in classroom	100
8. Implementing parent involvement	84

Implementation problems cited by the teachers generally focused on the KIDS Inventory in terms of the vagueness of wording and criteria, its lack of application to certain areas and handicapping conditions, and its need for modification and expansion. Other difficulties included the lack of appropriate materials and equipment for the Inventory, time required for administration and the inability to use the scale exclusively.

The 1978-79 Outreach evaluation findings also suggested a need for modification and expansion of the Project KIDS Inventory of Development Scale. Evaluation personnel recommended revisions of the scale in light of teacher and staff responses regarding its use in the program. As a result of these findings and recommendations, project management authorized initiation of revisions on the Inventory. The revised Inventory is expected to be available for use during the 1980-81 school year.

The Outreach teacners cited staff development needs in terms of better orientation to the program, the use and administration of tne KIDS Inventory and MAPs, and charting. The teachers further requested more staff development, based on teacher input, which would provide practical teaching skills.

The Outreach teachers most often cited the parent involvement component as the area in which they would like to have more assistance during the 1980-81 school year. Other frequently mentioned areas included charting of student progress, gross motor and cognitive/language activities, and the use, administration and adaptability of the KIDS Inventory.

Cited as a major advantage of the KIDS program was the KIDS Inventory in terms of its use for determining functional levels, noting student progress, and assistance with IEPs. In addition, the developmental sequence, organization and structure of tne program were cited as advantages. Also mentioned were the availability of resources, project staff as consultants, and the simplicity of the MAPs for use with teacher aides, parents, and others involved in an instructional role.

3. What technical assistance was provided?

Project staff provided technical assistance in each component area of replication. The Outreach teachers received technical assistance from project staff in the overall implementation of the KIDS model and in the delivery of developmental prescriptive intervention to children in the program. Technical assistance was provided in terms of the use and administration of the KIDS Inventory of Development Scale and in the use of the Curriculum Cross Reference System. The Outreach teachers also received technical assistance with MAPs, charting, parenting and classroom arrangement. The Region X Education Service Center also provided valuable tech-

nical assitance in model implementation through individual staff development sessions, meetings and workshops conducted in cooperation with project staff. Regional program personnel received individualized technical assistance in the development/implementation of site-specific evaluation plans for in-house evaluation and in the adaptation of the KIDS model components to fit individual site needs.

The majority of the Outreach teachers indicated favorable reactions to technical assistance in model implementation provided by project staff. However, one-fourth of the 43 Outreach teachers indicated that the technical assistance they received had not been helpful in terms of organization, planning, instruction or interaction with parents.

Regional program personnel (administrators and supporting staff) generally expressed positive reactions toward the technical assistance they received in the development/implementation of site-specific evaluation plans.

4. What was the reaction of project participants to staff development?

The resulting sample of teachers included 31 of the 45 Outreach teachers for a return rate of 68 percent. Reactions to staff development activities were generally positive and favorable. While the data showed that Outreach teachers felt that the project's staff development activities had been worthwhile and beneficial, previous responses regarding model implementation suggested a need for more staff development activities providing practical skills and teaching techniques.

5. What was the reaction of participating professionals to the project?

Staff reactions to the overall program were generally positive and favorable. The majority of the participants said that they had benefitted from their participation in the program and that the KIDS program had been a source of professional growth. Many participants also expressed pleasure with the program in terms of its organization, the structured individual emphasis, the well-developed instructional materials and methodology, availability of project staff as a resource, and the provision of standards for assessment.

6. What were the demonstration/dissemination activities of the project?

The project continued dissemination of materials in the areas of appraisal, curriculum, staff development, parent involvement and evaluation. A total of 160 dissemination packages was sold (at cost) to agencies and personnel in 23 states. Table 4 shows the distribution of purchased dissemination products.

Table 4

Dissemination Package Distribution
1979-80

	Location and Agency		Staff Development	Appraisal	Curriculum	Evaluation	Family Involvement
1.	Arizona, Tempe	Arizona State University	X	X	X	X	X
2.	Arkansas, El Dorado	Union County Ctr. Handicap			X (maps)		
3.	Canada, Saskatoon. Sask.	Asso. for Mentally Ret.	X	X	X	X	X
4.	Colorado, Gr. Junction	Mesa County SD	X				
5.	Colorado, Littleton	Arapahoe County SD	X	X	X (maps)	X	X
6.	Georgia, Atlanta	ASCD Materials Display	X	X	X (maps)	X	X
7.	Georgia, Atlanta	AU Materials Ctr.	X	X	X (maps)	X	X
8.	Illinois, Peoria	O-3 Replication					X
9.	Louisiana, Monroe	Northeast University	X	X	X (maps)	X	X
10.	Maine, Presque Isle	Arosstook Mental Health	X	X	X (maps)	X	X
11.	Mass., Concord	Concord-Carlisle RSD		X	X		X
12.	Mass., Rockland	North River Collaborative					X
13.	Mass., Boston	Boston State College					X
14.	Michigan, Alpena	Alpena Intermediate SD					X
15.	Michigan, Kalamazoo	Evaluation Center-WMU					X
16.	Michigan, E. Lansing	Michigan St. U.					X
17.	Michigan, Ypsilanti	Dept. of Ed. Psych-EMU					X
18.	Missouri, Columbia	U. of Missouri					X
19.	N. Carolina, Chapel H.	TADS				X	
20.	N. Carolina, Chapel H.	F. Porter Graham Child Dev. Ctr.	X	X	X (maps)	X	X
21.	N. Carolina, Chapel H.	U. of North Carolina	X	2	X	X	X
22.	N. Carolina, Chapel H.	TADS	X	X	X (maps)	X	X
23.	N. Carolina	Warsaw					X
24.	Nebraska, Omaha	U. of Nebraska Med. Sch.	X	X		X	X
25.	New Jersey, Northvale	Learning Through Coping					X
26.	New Hampshire, Exeter	Richie McFarland Ctr.					X
27.	Ohio, Cleveland	Positive Ed. Program	X	X	X	X	X
28.	Ohio, S. Euclid	SCCS Preschool Project		X			X
29.	Ohio, Toledo	Demo. Program Models	X	X	X (maps)	X	X
30.	Oklahoma, Okla. City	Public Welfare Commission	X	X	X (maps)		

Table 4 (Cont'd)

Dissemination Package Distribution
1979-80

	Location and Agency		Staff Development	Appraisal	Curriculum	Evaluation	Family Involvement
31.	Oklahoma, Pauls Valley	Garvin City Ed. Coop.		X	X (maps)		X
32.	Penn., Philadelphia	R&E - School Dist.				X	
33.	South Carolina, Ladson	St. Dept. Mental Retard.	3				X
34.	Texas Abilene	Woodson SERS	2	X	X (maps)	X	X
35.	Texas, Alvin	Kindergarten teacher		X	X		
36.	Texas, Arlington	Elem. Sch. Counselor	X	X	X	X	X
37.	Texas, Austin	Child, Inc.					X
38.	Texas, Austin	R&D Ctr. for Teacher Ed.					X
39.	Texas, Corpus Christi	SEDL	3	3	3 (maps)	3	3
40.	Texas, Dallas	Children, Inc.		X			
41.	Texas, Dallas	UCP	X	X	X (maps)	X	X
42.	Texas, Freeport	Brazoria-Ft. Bend Co-op.		X			
43.	Texas, Galveston	SERS		7			
44.	Texas, Houston	MHMR Infant Program					X
45.	Texas, Irving	Helping Hand Dev. Ctr.	X	X	X (maps)	X	X
46.	Texas, Kilgore	Region II Ser. Ctr.					X
47.	Texas, McKinney	MISD	X	2	X (maps)	X	X
48.	Texas, Richardson	Greenwood Hills Dev. Ctr.		X	X		
49.	Texas, Texas City	TCISD		X			
50.	West Virginia, Morgantown	UAF	X	X	X (maps)	X	X
51.	Wyoming, Laramie	Project WISP				X	
	TOTALS		28	40	27	25	41

Other activities included 6 site visits made to the project by outside groups or individuals during the year, 10 workshops and 23 presentations at professional conferences and meetings regarding various aspects of the KIDS model components and early childhood in general. A number of the workshops and presentations involved a puppet show, "KIDS On The Block," designed to teach children what it is like to be handicapped and to promote understanding and acceptance of the "different" child. The puppet show was co-sponsored by Project KIDS and the Down's Syndrome Guild.

The dissemination products were favorably received by the majority of the respondents. Overall responses generally indicated a high regard for the value and usefulness of the information and the extent to which the organization of the materials facilitated easy use and location of information in the packets. The resulting sample of product users was 23% (N=26) of the 112 user questionnaires mailed. However, the low rate of return was not surprising in light of the high rate of turnover in staff personnel and incomplete or inadequate addresses. Nevertheless, the results of the survey may have been biased as a result of the low sample return. Table 5 shows a summary of product users' reactions to the dissemination materials.

The materials were used by a variety of professionals and paraprofessionals including teachers, teacher aides, program coordinators and directors, program consultants, various therapists, family and home interventionists and by child development specialists. The Project KIDS materials were most often utilized for program and/or curriculum development or modification, staff training and development, student and parent assessments and for reference materials.

Respondents most often cited the conciseness, clarity, comprehensiveness and organization of the materials as positive aspects of the dissemination products. The majority of the respondents indicated that the information contained in the packets had met their expectations. Most further indicated that they would recommend the Project KIDS dissemination products to others.

Table 5

Responses to Rated Dissemination Items[a]

Item Content	Anchor Point	Percent Response 5	4	3	2	1	Anchor Point
Overall rating of packet(s) information.	Excellent	20.8	75	0.0	4.2	0.0	Poor
Rating of packet(s) in meeting your specific needs.	Very High	20.8	70.8	8.3	0.0	0.0	Poor
Packet(s) organization in facilitating easy use.	Excellent	29.2	62.5	8.3	0.0	0.0	Poor
Recommend use to others.	Absolutely Yes	12.5	62.5	20.8	4.2	0.0	Absolutely Not
Resonableness of packets cost[b]	Yes	100	--	--	--	0.0	No

[a]Sample was 26 users.

[b]This item used only a two-point response continuum.

Dallas Independent School District
Linus Wright, General Superintendent

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TECHNICAL ASSISTANCE TO THE HYPERKINESIS SCREENING PROJECT

SE80-119-31-08

Daniel J. Macy, Ph.D.
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Dallas, Texas
October 1980

Technical Assistance to the Hyperkinesis Screening Project

Evaluators: Daniel J. Macy and Jenci J. Kocsis

Objectives of the Program: The Hyperkinesis Screening Project is a developmental research project in response to a need expressed by the District's Learning Council for a procedure to report systematic observations regarding student hyperkinetic behavior. District personnel frequently receive requests from local physicians for such information, and the project basically sought to secure a standardized procedure for observation and reporting selected student behavior. The project was also an attempt to validate two existing behavior rating scales as a measure of hyperkinesis and to develop local norms for score interpretation.

Purpose of the Evaluation: The purposes of this study was to provide technical assistance to the project, since it was a cooperative undertaking by the Departments of Health Services, Pupil Personnel Services, Research and Evaluation, and Special Education.[a] Technical assistance included input to the design for data collection and statistical analysis of data.

Sample: The sample for the study included a quasi-random selection of 955 students aged 6 through 9 years. The population sampled included 12,462 students on the system-wide data base who met the following conditions:

1. Aged 6, 7, 8, or 9 years.
2. Date of birth within two months of February 12, 1980 (the mid-point of the two-week data collection period).
3. Ethnicity of Black, Hispanic, or White.
4. Gender of male or female.
5. No current enrollment or history of enrollment in special education.

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[a]Appreciation is extended to Drs. Richard Adams and Allen Sullivan, Stella Clapp, Richard Hughes, Roscoe Lewis, Martha Martin, Chris Mendes, and Clydia Steenson for their contributions to the planning and implementation of the study, and to the many classroom teachers and school nurses who participated in the data collection process.

The purpose of the sampling scheme was to obtain a random sample of about 40 children within each of 24 combinations of sex, age, and ethnicity, which were the variables thought to be most salient with hyperkinetic behavior. In order to allow for missing students during the data collection period, an initial random sample of 1,448 children was selected. The oversampling yielded random subsamples of about 60 children within each sex x age x ethnicity combination. Data were collected for the first 40 children (approximately) from the sample list who were available during the data collection period. Table 1 reports sample and population sizes for each subsample.

The final sample of 955 children represented 126 schools, which was an average of 7.6 children per school. The number of teachers sampled was 728, which was 1.3 children per teacher, and the number of nurses sampled was approximately 80, which was about 12 children per nurse. The sampling of teachers was dependent upon sampled children as each child's homeroom teacher completed behavior ratings. The nurses sampled were all school nurses who were available for the data collection task.

Table 2 gives the number of schools, teachers, and nurses represented within each of the 24 subsamples. The number of schools represented within subsamples ranged from 19 (male, nine-year old Hispanic children) to 34 (male, six year-old Hispanic children), and the number of teachers represented ranged from 28 (female, nine-year old Hispanic children) to 42 (for three subsamples).

Evaluation Design: The design of the study called for simultaneous behavior ratings completed for sampled children by teachers and nurses on two behavior rating scales. One scale, reported by Anthony Davids at E. Pendleton Bradley Hospital in Rhode Island, included six Likert-type items, and the second scale, reported by Guyette, Connors, and Ulrich of the University of Pittsburgh School of Medicine, included ten Likert-type items. The Davids scale used a six-point response continuum for each item, and the Connors scale used a four-point response continuum.

While the original Davids scale used a six-point response continuum, a four-point scale was used in this study. The first three points in the continua for items in the original Davids scale pertained to nonhyperkinetic behavior and were likely equivalent to the zero point on response continua in the Connors scale. Conversion of the Davids six-point continua to four-point permitted direct comparisons with the Connors scale.

The order of completion of the two behavior rating scales was counterbalanced in the initial random sample (N=1448) so that raters completed the Davids scale first for one-half the children and the Connors scale first for the remaining one-half. However, the actual sampling of children for observation affected the counterbalancing since the identity of missing children was not known until the time of observation, and there was no opportunity to alter the order of completion once data collection had begun. Analysis of the degree of counterbalancing in the final sample of 955 children showed that the order of scale completion was about half and half within the total sample, and Tables 3 and 4 report these data for major sample groups (ethnicity, sex, and age) and for each of the 24 subsamples.

Table 1

Sampling Specifications and Outcomes

Subsample		Population N	Sample N	Percent Sampled	Number Sampled in Data Collection
Female 6 yr.	Black	673	61	9	41
	Hispanic	315	57	19	40
	White	402	60	15	40
Female 7 yr.	Black	784	63	8	45
	Hispanic	352	54	17	38
	White	477	62	13	43
Female 8 yr.	Black	770	62	8	43
	Hispanic	341	69	18	38
	White	424	59	14	44
Female 9 yr.	Black	892	62	7	38
	Hispanic	369	60	16	31
	White	510	61	12	45
Male 6 yr.	Black	660	59	9	38
	Hispanic	368	59	16	46
	White	367	59	16	36
Male 7 yr.	Black	744	60	8	41
	Hispanic	377	58	16	40
	White	411	62	15	37
Male 8 yr.	Black	762	61	8	44
	Hispanic	358	63	17	35
	White	432	60	14	43
Male 9 yr.	Black	837	59	7	37
	Hispanic	353	60	17	32
	White	484	58	12	40
Total		12462	1448	12	955

Table 2

Number of Schools, Teachers, and Nurses Represented Within Subsamples[a]

Subsample		Schools	Teachers
Female	6 yr. Black	32	40
	Hispanic	28	36
	White	30	39
Female	7 yr. Black	31	41
	Hispanic	25	33
	White	33	38
Female	8 yr. Black	30	40
	Hispanic	30	37
	White	32	42
Female	9 yr. Black	27	37
	Hispanic	22	28
	White	32	40
Male	6 yr. Black	32	38
	Hispanic	34	42
	White	29	34
Male	7 yr. Black	31	39
	Hispanic	26	36
	White	31	33
Male	8 yr. Black	28	42
	Hispanic	22	33
	White	30	36
Male	9 yr. Black	28	35
	Hispanic	19	29
	White	29	38

[a]Totals are not presented since a given teacher, nurse, or school may have been represented in more than one subsample.

Table 3

Percent of Sample Rated First on
the Davids or Connors Scale

Sample Group	N	Davids First	Connors First
Female	486	54%	46%
Male	469	48	52
Black	327	52	48
Hispanic	300	51	49
White	328	51	49
Six-year-old	241	51	49
Seven-year-old	244	53	47
Eight-year-old	247	47	53
Nine-year-old	223	54	46
Total Sample	955	51%	49%

Table 4

Percent of Sample Rated First on
the David's or Connor's Scale

Subsample			N	Davids First	Connors First
Female	6 yr. old	Black	41	39%	61%
		Hispanic	40	52	48
		White	40	52	48
Female	7 yr. old	Black	45	69	31
		Hispanic	38	53	47
		White	43	60	40
Female	8 yr. old	Black	43	47	53
		Hispanic	38	45	55
		White	44	52	48
Female	9 yr. old	Black	38	61	39
		Hispanic	31	61	39
		White	45	56	44
Male	6 yr. old	Black	38	55	45
		Hispanic	46	52	48
		White	36	56	44
Male	7 yr. old	Black	41	51	49
		Hispanic	40	40	60
		White	37	41	59
Male	8 yr. old	Black	44	36	63
		Hispanic	35	51	49
		White	43	53	47
Male	9 yr. old	Black	37	57	43
		Hispanic	32	53	47
		White	40	38	62

The data in Table 3 show that the order of rating scale completion was about half and half within major sample groups, but the order of completion was out of balance for selected subsamples (Table 4). The greatest imbalance was for the subsample of male, eight-year-old Black children in which only 36% received ratings on the Davids scale first.

The possible effect of order of scale completion was tested within all major sample groups and within the 24 subsamples. These tests revealed no evidence of an effect due to completion order (see Tables 5, 6, 7, and 8). The isolated statistically significant t-test values reported in Tables 5-8 were likely due to sampling error, since the subsamples were nonrandomly selected and since the pattern of score averages was almost always consistent on both the Davids and Connors in those subsamples where t-values were significant. A completion order effect would likely have resulted in the average score being high on one scale and low on the other scale, but this pattern was evident in only a few cases. In these latter cases, the statistically significant t-values were assumed to be due to nothing more than sampling since a number of significant t-values are expected when numerous t-values are computed at one time. Therefore, it was reasonable to conclude that order of completion did not affect ratings by either teachers or nurses.

School nurses attended an orientation session about procedures for completing the behavior rating scales and worked closely with school principals and teachers in the collection of behavior ratings. To a large degree, nurses were responsible for the mechanics of data collection and assisted teachers in the selection of children from sample rosters, disseminated rating scales, and provided guidance to teachers in the mechanics of completing the behavior scales.

Teachers relied on cumulative knowledge and experience about children in responding to items on the scales. There was ample opportunity for teachers to have known the children, since the time of data collection was the middle two weeks in February. Nurses, on the other hand, relied on a brief classroom observation period (at least 30 to 40 minutes) while the teacher was conducting an academic activity, such as reading or math, and while the child was basically engaged in in-seat activity. Teachers and nurses were instructed to complete their observtions independently of each other.

Major Evaluation Questions and Results

1. What were the distribution properties of behavior observations?

   As expected, ratings of behavior were positively skewed, and the vast majority of ratings indicated nonhyperkinetic behavior. Table 9 reports statistics describing the total scale score distribution for both rating scales.

Table 5

Effect of Order of Scale Completion in Teacher Ratings
Within Major Sample Groups

Sample Group	N	Davids Average Score: Davids First	Davids Average Score: Conners First	t	P	Connors Average Score: Davids First	Connors Average Score: Connors First	t	P
Female	486	13.99	14.17	-.30	NS	5.32	5.24	-.15	NS
Male	469	15.57	15.72	-.24	NS	6.92	7.07	-.26	NS
Black	327	15.57	16.27	-.88	NS	7.02	7.41	-.50	NS
Hispanic	300	13.55	13.98	-.62	NS	4.98	5.22	-.40	NS
White	328	14.94	14.61	.46	NS	6.08	5.88	.29	NS
Six-year-old	241	14.24	16.05	-2.11	<.05	5.20	7.11	-2.37	<.05
Seven-year-old	244	14.46	14.10	.46	NS	5.87	5.47	.53	NS
Eight-year-old	247	15.26	15.38	-.15	NS	6.97	6.58	.46	NS
Nine-year-old	223	14.99	14.20	.85	NS	6.28	5.46	1.00	NS
Total	955	14.73	14.97	-.58	NS	6.06	6.19	-.31	NS

Table 6

Effect of Order of Scale Completion in Nurse Ratings
Within Major Sample Groups

Sample Group	N	Davids Average Score: Davids First	Davids Average Score: Connors First	t	P	Connors Average Score: Davids First	Connors Average Score: Connors First	t	P
Female	486	12.40	12.38	.05	NS	3.21	3.00	.57	NS
Male	469	13.82	13.86	-.07	NS	4.48	3.92	1.28	NS
Black	327	14.14	14.98	-1.24	NS	4.25	4.61	-.65	NS
Hispanic	300	11.47	11.24	.44	NS	3.11	2.47	1.66	NS
White	328	13.42	13.11	.45	NS	3.97	3.30	1.35	NS
Six-year-old	241	12.23	14.17	-2.56	<.05	3.34	4.50	-1.99	<.05
Seven-year-old	244	13.26	13.17	.11	NS	4.05	3.43	1.12	NS
Eight-year-old	247	13.43	13.04	.53	NS	3.92	3.26	1.17	NS
Nine-year-old	223	13.35	12.09	1.54	NS	3.88	2.65	2.25	<.05
Total	955	13.06	3.15	-.23	NS	3.80	3.48	1.12	NS

Table 7

Effect of Order of Scale Completion
in Teacher Ratings Within Subsamples

Subsample		Davids Average Score				Connors Average Score			
		Davids First	Connors First	t	P	Davids First	Connors First	t	P
Female 6 yr. old	Black	2.94	2.88	.04	NS	7.44	6.56	.35	NS
	Hispanic	1.57	.63	1.73	NS	3.95	3.26	.53	NS
	White	1.00	4.21	-3.24	<.01	3.57	10.47	-3.90	<.01
Female 7 yr. old	Black	1.29	.71	.93	NS	3.97	2.93	.78	NS
	Hispanic	2.10	1.83	.23	NS	6.10	5.72	.17	NS
	White	1.35	.71	1.09	NS	5.62	3.41	1.25	NS
Female 8 yr. old	Black	1.45	3.09	-1.55	NS	6.70	6.74	-.02	NS
	Hispanic	1.29	2.00	-.82	NS	4.24	5.43	-.71	NS
	White	2.87	1.14	1.61	NS	7.43	4.71	1.34	NS
Female 9 yr. old	Black	1.87	1.60	.22	NS	6.83	4.73	.92	NS
	Hispanic	.79	1.67	-1.01	NS	3.42	5.42	-1.00	NS
	White	1.76	.35	2.56	<.05	5.12	2.15	2.42	<.05
Male 6 yr. old	Black	1.10	4.29	-2.78	<.05	4.67	11.00	-2.71	<.05
	Hispanic	1.21	1.27	-.12	NS	4.62	5.00	-.29	NS
	White	2.70	2.94	-.23	NS	7.65	7.31	.15	NS
Male 7 yr. old	Black	2.38	2.75	-.32	NS	7.52	7.40	.06	NS
	Hispanic	1.56	1.96	-.44	NS	7.81	6.12	.87	NS
	White	1.47	1.50	-.04	NS	5.53	6.00	-.27	NS
Male 8 yr. old	Black	2.69	3.50	-.60	NS	11.25	8.93	1.01	NS
	Hispanic	1.56	1.82	-.26	NS	5.83	5.71	.07	NS
	White	2.65	2.35	.25	NS	6.70	7.00	-.13	NS
Male 9 yr. old	Black	4.52	4.00	.37	NS	10.38	9.69	.28	NS
	Hispanic	1.65	1.87	-.24	NS	4.35	5.00	-.34	NS
	White	2.47	2.12	.30	NS	7.40	6.12	.68	NS

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Table 8

Effect of Order of Scale Completion
in Nurse Ratings Within Subsamples

Subsample		Davids Average Score				Connors Average Score			
		Davids First	Connors First	t	P	Davids First	Connors First	t	P
Female 6 yr. old	Black	.81	2.20	-1.85	NS	3.62	5.88	-1.48	NS
	Hispanic	.14	.32	-.82	NS	2.95	1.58	1.69	NS
	White	.33	1.84	-1.57	NS	1.81	4.74	-1.96	NS
Female 7 yr. old	Black	.42	.43	-.03	NS	3.10	1.64	2.21	<.05
	Hispanic	.40	.89	-1.38	NS	3.15	3.00	0.15	NS
	White	1.77	.71	1.21	NS	4.62	2.88	1.08	NS
Female 8 yr. old	Black	1.50	.83	1.15	NS	3.70	3.26	0.36	NS
	Hispanic	.29	.33	-.15	NS	2.00	1.71	.31	NS
	White	1.48	1.29	.20	NS	4.13	3.43	.40	NS
Female 9 yr. old	Black	.91	.60	.67	NS	3.87	2.53	1.26	NS
	Hispanic	.21	.50	-.65	NS	1.74	2.50	-.66	NS
	White	1.08	.15	2.50	<.05	3.20	1.45	2.08	<.05
Male 6 yr. old.	Black	1.38	2.65	-1.40	NS	3.90	6.71	-1.64	NS
	Hispanic	.54	.36	.55	NS	2.88	3.55	-.60	NS
	White	1.45	1.94	-.50	NS	5.10	4.50	.40	NS
Male 7 yr. old	Black	1.71	2.55	-.72	NS	5.05	5.95	-.45	NS
	Hispanic	1.19	.58	.97	NS	4.94	2.79	1.42	NS
	White	2.00	.86	1.40	NS	3.93	3.73	.17	NS
Male 8 yr. old	Black	1.62	2.11	-.48	NS	5.50	4.75	.43	NS
	Hispanic	.67	.65	.03	NS	4.56	2.18	2.26	<.05
	White	1.22	1.05	.27	NS	3.74	3.55	.16	NS
Male 9 yr old	Black	2.29	2.38	-.07	NS	6.00	5.00	.51	NS
	Hispanic	.88	.33	.77	NS	2.94	2.20	.58	NS
	White	3.07	1.16	1.76	NS	5.80	2.52	1.96	NS

Inspection of Table 9 shows that the most frequent rating (i.e., the mode) was always 0.00 for both scales regardless of rater (0.00 indicated nonhyperkinetic behavior). The Connors scale resulted in total score distributions that were less skewed and peaked (indicated by kurtosis) than those from the Davids scale, which was likely due to the greater number of items in the Connors scale (ten items as compared to six in the Davids scale). The data in Table 7 show also that teachers reported a greater incidence of hyperkinetic-type behavior than did nurses, presumably since teachers knew the students much better than nurses and drew upon several months of observations.

Analysis of distribution properties by individual scale items revealed similar properties for individual items. Complete statistics are not reported for individual items, but Tables 10 and 11 do report the percent of children rated by response category for each item. These data indicate that the patterns observed in total score distributions (see Table 9) were consistent across individual items.

The data in Tables 10 and 11 also show that the reported incidence of behavior varied across individual items. For example, on the Davids scale, teachers reported that 30% of the children showed hyperactivity or short attention (Table 10, items one and two), but only 12% (item six) showed explosive behavior. Teachers reported on the Connors that 55% (Table 11, item one) of sampled children exhibited restlessness, but that only 20% (item eight) cried easily. The frequency of temper outbursts was also nearly the same as crying.

2. What cutoff scores suggest hyperkinesis by grade, sex, and ethnicity?

The issue of age, sex, and ethnic group differences is critical when interpreting scores for evaluation of hyperkinesis. Simply put, a given score on the Connors or Davids scale could be more or less indicative of hyperkinesis depending on the child's age, sex, or ethnicity.

The study assumed that behavior ratings would vary across grade, sex, and ethnic groups, since these factors were believed to be associated with varying behavior patterns. Analysis of variance (F-tests) revealed significant effects associated with two of these factors, and Table 12 reports these findings for major factors of age, sex, and ethnicity.

Table 9

Total Scale Score Distribution Properties

	Davids[a]		Connors[b]	
	Teacher	Nurse	Teacher	Nurse
Mean	2.04	1.25	6.13	3.64
Median	0.46	0.22	4.27	2.27
Mode	0.00	0.00	0.00	0.00
Standard deviation	3.27	2.39	6.27	4.40
Skewness	2.11	2.89	1.28	1.77
Kurtosis	4.54	9.78	1.36	3.84

[a]Total possible score on the Davids ranges from 0 through 18.

[b]Total possible score on the Connors ranges from 0 through 30.

Table 10

Percent Rated in Each Response Category for Each Item in the Davids Scale[a]

Item[b]	Teachers				Nurses			
	0	1	2	3	0	1	2	3
1 - Hyperactivity	70	20	7	3	79	15	4	2
2 - Short attention	70	16	10	4	78	15	5	1
3 - Variability	77	15	5	3	89	8	2	1
4 - Impulsiveness	78	14	6	2	84	12	3	1
5 - Irritability	82	12	4	2	92	7	1	< 1
6 - Explosiveness	88	9	2	1	94	5	1	< 1

[a]Total N=955 rated by both teachers and nurses.

[b]Response categories: 0 = slightly less to much less than normal children, 1 = slightly more than normal children, 2 = more than normal children, 3 = much more than normal children.

Table 11

Percent Rated in Each Response Category for Each Item in the Connors Scale[a]

Item	Teachers				Nurses			
	0	1	2	3	0	1	2	3
1 - Restless	45	37	13	5	52	38	8	2
2 - Excitable	47	34	14	5	67	26	6	1
3 - Disturbs others	48	36	11	5	67	26	6	1
4 - Fails to finish	55	25	11	9	64	27	7	2
5 - Fidgeting	46	35	12	7	51	38	9	2
6 - Inattentive	40	38	14	8	53	36	9	2
7 - Demanding	66	23	8	3	80	15	4	1
8 - Cries easily	80	14	4	2	95	4	< 1	< 1
9 - Mood change	74	18	6	2	89	9	2	1
10 - Temper outburst	79	15	4	2	92	6	1	< 1

[a]Total N=955 rated by both teachers and nurses.

[b]Responses categories: 0 = not at all, 1 = just a little, 2 = pretty much, 3 = very much.

Table 12

F-Tests for Major Factors in Teacher and Nurse Ratings

Major Factor	Teachers				Nurses			
	Davids		Connors		Davids		Connors	
	F	P	F	P	F	P	F	P
Age	1.68	NS	1.36	NS	0.04	NS	1.01	NS
Sex	8.68	<.01	19.08	<.01	14.87	<.01	15.28	<.01
Ethnicity	8.13	<.01	9.68	<.01	16.66	<.01	11.84	<.01

[a] Interactions among major factors were not significant and are not reported.

The data in Table 12 show that sex and ethnicity groups differed significantly in terms of behavior rating scores but that age groups did not differ significantly. The absence of a significant age effect was somewhat surprising. Directions on the Connors scale made no reference to any student characteristic, but directions on the Davids scale instructed raters to judge children in comparison with other children of the same age and sex. If raters followed the Davids scale directive, they were likely to have done so subconsciously on the Connors scale since the order of scale completion was counterbalanced.

The above findings suggested that raters judged children in comparison to their own age group on both scales, since there were no significant age effects, but raters apparently did not allow for sex, since there were significant sex effects. One possible explanation is that professionals had different behavior expectations for different age groups, but not for different sex groups. In other words, professionals expected boys and girls to act the same but not six- and nine-year-olds to act the same.

While the above sex and ethnicity differences were statistically significant ($p < .01$), the extent of practical significance in the observed differences was relatively small. Table 13 reports averages and standard deviations for age, sex, and ethnicity groups, and Table 14 gives the results of the analysis of practical significance of the observed, statistically significant difrerences. Practical significance was analyzed in terms of the ratio of the difference between the largest and smallest average score to the within group standard deviation. This ratio was multiplied by 100 to express the difference between group means in terms of a percent of the standard deviation.

Inspection of Table 13 shows that both teachers and nurses rated males as being more hyperactive on both scales, and raters gave Black children higher ratings (i.e., more hyperactive) than White children, and Hispanic children received lower ratings than either Black or White children. The results reported in Table 14 indicate, however, that these differences were not large and did not appear to have great practical significance. The differences were typically only about one-quarter or one-third of a standard deviation. In cases involving educational achievement, differences of one quarter standard deviation would be trivial and would have little or no practical significance, but in cases involving screening decisions such differences have greater impact, since decisions involve individual children.

Table 13

Average Scores and Standard Deviations
on the Davids and Connors Scales

Sample Group	Teachers				Nurses			
	Davids		Connors		Davids		Connors	
	X	SD	X	SD	X	SD	X	SD
Female	1.74	3.12	5.29	6.00	0.85	2.04	3.12	4.02
Male	2.34	3.40	7.00	6.43	1.41	2.67	4.19	4.70
Black	2.56	3.86	7.21	7.05	1.52	2.76	4.43	4.97
Hispanic	1.54	2.55	5.10	5.25	0.51	1.36	2.79	3.35
White	1.96	3.15	5.98	6.13	1.29	2.61	3.64	4.50
Six-year-old	2.15	3.21	6.13	6.32	1.14	2.42	3.91	4.54
Seven-year-old	1.66	2.92	5.68	5.85	1.11	2.40	3.76	4.44
Eight-year-old	2.28	3.62	6.77	6.72	1.13	2.39	3.57	4.44
Nine-year-old	2.05	3.29	5.90	6.11	1.13	2.39	3.31	4.15
Total	2.03	3.27	6.13	6.27	1.12	2.39	3.64	4.40

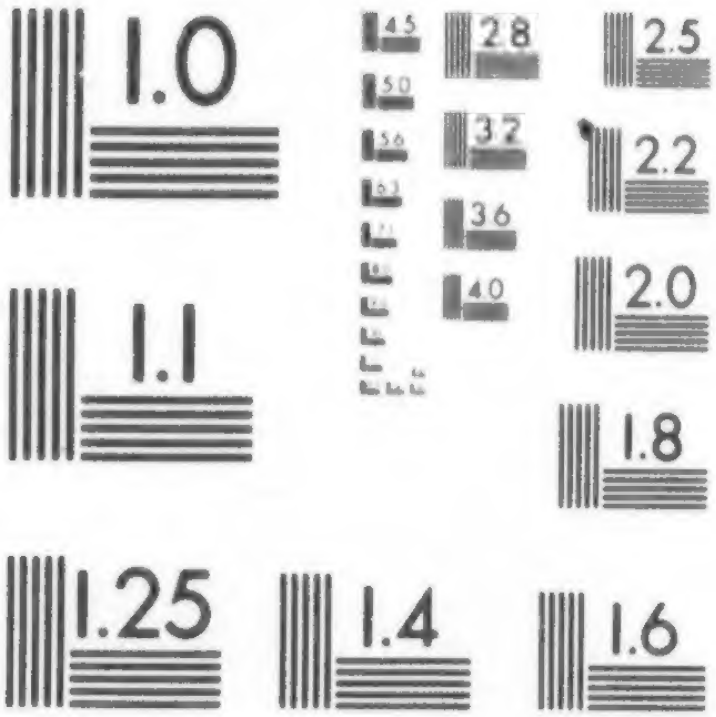
Table 14

Analysis of Practical Significance
of Statistically Significant Ethnic
and Sex Group Differences

Groups	Teachers				Nurses			
	Davids		Connors		Davids		Connors	
	Difference	%SD	Difference	%SD	Difference	%SD	Difference	%SD
Sex	0.60	18	1.71	27	0.56	24	1.07	24
Ethnic	1.02	32	1.23	20	1.01	43	1.64	38

[a]Difference between the largest and smallest average score for individual ethnic (Black, Hispanic, White) or sex groups.

[b]Computed as the ratio of the difference between largest and smallest average score to the within group standard deviation times 100.



MICROCOPY RESOLUTION TEST CHART
NATIONAL BUREAU OF STANDARDS
STANDARD REFERENCE MATERIAL 1010a
(ANSI and ISO TEST CHART No. 2)

The above results indicate the need for different cutoff scores when screening for hyperkinesis by sex and ethnic groups, and Table 15 presents minimum cutoff scores in terms of sex and ethnic groups. Inspection of these data supports the need for variable cutoff scores dependent on sex and ethnicity (of course, cutoff scores for actual screening would have to be based on both sex and ethnicity).

3. How did District norms compare to published norms?

Normative data were not available for comparison on the Connors scale; one literature reference implied the availability of norms, but inspection of the report failed to locate useful norms (Goyette, Connors, & Ulrich, 1978). The early report of the Davids scale included suggested cutoff scores for screening and referral (Davids, 1971), and the author proposed these as tentative guidelines based on preliminary clinical findings.

The score guidelines proposed for the Davids scale were as follows:

Total score

18 or less - absence of significant hyperkinesis
19-23 - marginal identification
24 or more - presence of hyperkinesis suggested.

Table 16 reports the percent of children sampled in the current study classified according to the above score guidelines. As expected, the proposed score guidelines yielded different percents according to sex and ethnic groups, but the overall percent classified at risk by teacher ratings (28%) was rather high, and the proposed score guidelines may not be applicable in large urban school districts.

Table 15 also presents cutoff scores for the Davids scale, but the data are not comparable to those reported in Table 16. Analysis used in question three (Table 16) used six-point response continua in scoring the Davids scale items in order to make scores comparable to the scoring procedure initially reported (Davids, 1971). All other analyses in this report (including Table 15) used four-point response continua to permit direct comparisons to the Connors scale.

Table 15

Minimum Cutoff Scores to Select Ten or Five Percent of a Sample Group for Hyperkinesis Referral[a]

	Teachers				Nurses			
	Davids		Connors		Davids		Connors	
	10%	5%	10%	5%	10%	5%	10%	5%
Total	7	10	16	19	4	7	10	13
Female	6	9	14	18	5	8	9	11
Male	7	10	17	20	3	5	11	14
Black	8	12	18	22	6	8	11	15
Hispanic	5	7	12	17	2	3	7	10
White	7	10	15	19	5	8	10	13

[a]Actual percents selected vary slightly about 10 and 5% due to fluctuations in score distributions.

Table 16

Percent of Sampled Children Classified as Possibly Hyperkinetic According to the Davids Scale Norm Criteria

	Teacher Rating				Nurse Rating			
	Not Hyperk.	Marginal	Probable Hyperk.	Total Percent at Risk	Not Hyperk.	Marginal	Probable Hyperk.	Total Percent at risk
Female	76	15	9	24	86	10	4	14
Male	68	18	14	32	78	13	9	22
Black	65	21	14	35	66	24	10	34
Hispanic	80	12	8	20	92	7	1	8
White	72	17	11	28	80	12	8	20
Total Sample	72	17	11	28	82	12	6	18

[a]Total score 18 or less.

[b]Total score 19-23.

[c]Total score 24 or more.

4. What was the correlation between observations of nurses and of classroom teachers?

Correlation coefficients generally indicated weak to moderate relationships between ratings completed by teachers and those completed by nurses. Table 17 presents these coefficients and shows that correlations ranged from .34 to .56. Since the square of the correlation gives the proportion of common variance between two measures, the proportion of common variance ranged from .12 to .31. Basically, ratings by teachers and nurses did not represent the same judgments. The above results (taking into consideration the brief observation period available to nurses) indicate that, as expected, teachers are the preferred source in collecting ratings of hyperkinetic behavior.

Table 17

Correlation Between Total Score
Given by Nurses and by Teachers

Sample Group	N	Scale	
		Davids	Connors
Female	486	.49	.49
Male	469	.53	.53
Black	327	.55	.50
Hispanic	300	.34	.44
White	328	.53	.56
Six-year-old	241	.52	.47
Seven-year-old	244	.51	.55
Eight-year-old	247	.56	.54
Nine-year-old	223	.46	.53
Total Sample	955	.51	.52

5. What was the correlation between observations recorded in the two selected behavior rating scales?

Correlation coefficients generally revealed moderate to strong relationships between ratings completed on the Davids and Connors scales for both teachers and nurses. Table 18 reports those coefficients and shows that correlations ranged from .55 to .86, but most ranged from .77 to .86. The proportion of common variance between the Davids and Connors scales ranged mostly from .59 to .74, which indicated high agreement between the scales in terms of information provided. The above results indicated that either scale would provide much of the same information provided by the other scale, except in the case of nurses rating Hispanic children where the correlation was fairly low (r=.55).

Table 18

Correlation Between Total Score
on Davids Scale and Connors Scale

Sample Group	N	Raters	
		Teachers	Nurses
Male	469	.83	.81
Female	486	.83	.79
White	328	.84	.86
Black	327	.85	.82
Hispanic	300	.77	.55
Six-year-old	241	.86	.77
Seven-year-old	244	.80	.82
Eight-year-old	247	.83	.81
Nine-year-old	223	.85	.80
Total Sample	955	.83	.80

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EVALUATION OF THE STRUCTURED ENVIRONMENT FOR THE EMOTIONALLY DISTURBED (SEED) PROJECT

SP81-430-11-08

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October 1980

Evaluation of the Structured Environment for the Emotionally Disturbed (SEED) Project

Evaluators: Donald E. Hawkins and Alberta M. Rogers

Objectives of the Program: The program is intended to provide an instructional system that will meet the needs of the individual student participants by assisting them to adjust and function intellectually, emotionally, and socially at their expected level. The primary benefit expected is an effective and replicable model for serving children diagnosed as severely emotionally disturbed. The 1979-1980 school year was the second year of the program's proposed three-year developmental period. Second-year implementation focused on the refinement of program components and on continuing the delivery of services to emotionally disturbed students.

Purpose of the Evaluation: The evaluation of the program focused on providing decision makers with information relative to: (a) the degree of program implementation; (b) the attitudes of teachers, staff members, non-project personnel, and parents toward the program; and (c) the achievements of the students. The extent to which the students developed more socially acceptable behavior was stressed as a program outcome. Changes in the rate of disciplinary referrals, suspensions, dropouts, disruptive classroom behaviors, and truancy were some of the major determinants.

Sample: Students designated to enter the program were identified through a multidisciplinary process as having an emotional condition that had been medically and/or psychologically determined to be such that they could not be adequately and safely educated in the regular classes of the public schools without the provision of special services. These students, diagnosed as severely emotionally disturbed, also met the Texas eligibility requirements consistent with Public Law 94-142. The program was implemented at two schools, one elementary and one secondary.

School	Grades	No. Students	No. Teachers
Harry C. Withers	K-6	38	4
Hillcrest North	7-12	49	3

A sample of participating students' parents consisted of 12 parents. The non-participant professional sample consisted of 23 teachers and administrators.

Evaluation Design: Project staff, teachers and aides maintained daily records and behavioral profiles for students participating in the program. These data were collected and reviewed at six-week intervals by evaluation personnel. The data were analyzed and compared with baseline data to determine individual student progress. The Wide Range Achievement Test was administered to program students at the beginning of the year and again at the end of the year. Pretest and posttest scores were analyzed along with process data to determine individual academic progression. Parental involvement/contact logs and counseling logs were maintained by the project visiting teacher and by project psychologists, respectively. Information from these logs was collected and reviewed at six-week intervals.

Project teachers and aides were administered questionnaires at the beginning and at the end of the year. Parents of project students and non-project personnel located at project sites were administered questionnaires at the end of the year.

An assessment of the progress of component refinement and modification was made using the Documentation of Management Decisions report which was based on the evaluation results for the 1978-1979 school year. Described in this report were ten problem areas arising in the implementation of the project which were addressed by the management team during the 1979-1980 school year, with alternative actions being discussed and adopted as project policy. These areas were: (a) an identifiable approach to instructional programming; (b) a systematic and consistent counseling program; (c) expansion of parent involvement; (d) establishment of consistent criteria for student progress; (e) completion of building modification; (f) placement of full staff; (g) administration of standardized tests for academic achievement and self-concept; (h) identifiable process for mainstreaming; (i) facilitation of managment interaction; (j) and supervision of students beyond the project's physical setting. The evaluation attempted to document the degree to which the management team was successful in determining these alternative actions. Direct observation of the implementation of program components took place three times at both project sites. The results are included with each relevant major evaluation question, and are reported according to the current status of the project components and in relationship to the project's previous status at the end of the 1978-1979 school year.

Major Evaluation Questions and Results

1. What was the environment of the SEED project?

   Schools: Project SEED was implemented at H. C. Withers Elementary School and at Hillcrest North Secondary School. Both schools are located in the Northwest Subdistrict on DISD campuses where the regular continuum of curriculum and student services were being provided in both regular and special education classrooms.

Along with strategically arranged classrooms, other settings within both environments included a breakroom for free-time/play activities, a counseling room, a time-out room with two crisis-room components, and a staff office room.

Students. Eighty-seven students enrolled in the program sometime during the 1979-1980 school year, including thirty-eight elementary students as seen in Table 1 and forty-nine secondary students as seen in Table 2. Eighty-two (94%) students were diagnosed as primarily emotionally disturbed. Five (6%) students' primary handicaps were not diagnosed as emotionally disturbed, including two learning disabled, two educable mentally retarded, and one multihandicapped.

Students' ages ranged from six to seventeen with an average elementary age of 9.5 years and an average secondary age of 14.3 years. Intelligence quotients (IQ) ranged from 42 (moderately retarded) to 123 (superior) with an average elementary and secondary IQ of 72 (borderline). The student population was made up of 86% males and 14% females with 54% Black, 37% White, and 9% Hispanics as seen in Table 3.

Students generally were referred to the program because they exhibited problematic classroom behaviors including the following: (a) not being in seat; quiet, and on task; (b) fighting or picking on others; (c) throwing objects; (d) destroying materials; (e) talking out or arguing; (f) tantruming; (g) using improper language; (h) running in the building; (i) smoking; and (j) sexual misconduct.

Teachers and Staff. Staff allocations for the 1978-1979 school year appeared to be inappropriate for project goals. This area of concern was addressed by the management team after funds for a full-time educational diagnostician were cut from the program and after no funds were made available for the additional home-school liaison requested by project management. The consensus of the management team was that sufficient support personnel were available within the delivery system of the District to provide needed assistance to the program staff during 1979-1980.

The staff consisted of eight teachers, seven teacher aides, a home-school liaison, three psychologists, and two project managers who were also psychologists. Teachers had an average of 10 years experience in education and 4.6 years in dealing with the emotionally disturbed. For the aides, the averages were 8.3 years and 3.8 years, respectively. The psychologists and project managers had an average of 5 years in education and 3.8 years in dealing with the emotionally disturbed. The home-school liaison had one year experience in both areas. Eighty-one percent of the staff were female including all teachers and aides. There were fifteen (71%) White and six (29%) Black staff members. Two bilingual psychologists also participated on a part-time basis.

Table 1

Demographic Data For Students at Withers

Student	Age	WISC-R I.Q.	WRAT Grade Performance Level			Handicaps[a]	
			Reading	Spelling	Arithmetic	Primary	Secondary
1	9	84				ED	
2	11	83	1.9	1.8	3.6	MH	ED
3	13	42[b]				ED	EMR
4	11	75				ED	
5	8	48[b]	1.3	1.0	K.6	ED	SH
6	6	84[b]				ED	
7	11	53	1.5	PK.5	1.5	ED	EMR
8	13	61	5.0	4.0	2.3	ED	SH
9	9	95	5.0	3.9	2.8	ED	
10	9	78	1.6	2.2	3.3	ED	
11	8	85	1.1	1.0	2.8	ED	
12	7	79[b]	1.6	1.7	K.6	ED	
13	11	72				ED	
14	11	55	2.3	2.0	2.2	ED	SH
15	11	72	1.8	1.9	1.4	EMR	
16	6	85	K.2	PK.9	PK.9	ED	SH
17	8	70	1.4	1.2	1.4	LD	ED
18	12	59				ED	SH
19	11	97	10.9	7.2	4.2	ED	
20	7	55[b]				ED	OHI
21	11	72	3.1	2.7	3.2	ED	SH
22	11	68	1.5	1.6	2.2	ED	SH
23	12	59	10.9	6.5	3.9	ED	
24	11	68	2.0	1.7	3.0	ED	
25	10	84	4.1	2.7	3.6	ED	
26	6	68	K.6	1.1	PK.6	ED	
27	8	66	1.4	1.4	2.4	LD	SH
28	11	72	1.4	1.3	2.2	ED	
29	10	89	4.7	3.7	3.0	ED	
30	7	68				ED	
31	7	55	1.3	K.8	K.5	ED	SH
32	12	78	1.5	1.5	2.6	ED	SH
33	12	82	2.8	3.7	3.9	ED	
34	7	69	1.2	1.1	1.2	ED	
35	8	100	3.8	2.9	2.1	ED	
36	9					ED	
37	10	55				ED	LD
38	11	71	4.1	3.2	3.2	ED	SH

[a]Abbreviations for handicaps area as follows: ED-emotionally disturbed; EMR- educable mentally retarded; LD-learning disabled; MH-multiple handicapped; OHI-other health impaired; SH-speech handicapped

[b]Scores obtained from the Stanford-Binet.

Table 2

Demographic Data For Students at Hillcrest

STUDENT	AGE	WISC-R I.Q.	WRAT Grade Performance Level			Handicaps[a]	
			Reading	Spelling	Arithmetic	Primary	Secondary
1	14	71				ED	
2	16	57				ED	
3	17	75	4.8	5.2		ED	
4	16	51				EMR	
5	14	69				ED	
6	14	81				ED	
7	12	74	4.2	4.2	3.9	ED	
8	17	84				ED	
9	14	63	1.7	2.2	2.9	ED	
10	14	78	3.5	3.7	4.4	ED	
11	12	73	3.7	3.0	2.7	ED	
12	15	98				ED	
13	14	55	3.9	3.7	2.9	ED	
14	13	64	3.6	2.4	3.9	ED	
15	16	70				ED	
16	14	92				ED	
17	16	62	5.4	5.2	2.9	ED	
18	15	123				ED	
19	15	64				ED	
20	15	77	4.8	5.2	5.7	ED	
21	13	42				ED	
22	16	59				ED	
23	17	98				ED	
24	13	67				ED	SH
25	13	86				ED	
26	16	71				ED	
27	13	59	3.1	2.4	2.3	ED	
28	14	87	3.2	3.0	5.3	ED	
29	14	66	2.6	2.6	2.3	ED	
30	13	55	2.8	3.0	4.4	ED	
31	13	63				ED	
32	14	58				ED	
33	13	71	4.2	4.0	3.4	ED	
34	14					ED	
35	13	41	2.5	3.0	1.3	ED	
36	15	93				ED	
37	15	102				ED	
38	15	54	2.0	1.9	2.3	ED	SH
39	15	78				ED	
40	17	80				ED	
41	13	105	8.6	5.2	6.2	ED	
42	13	79	5.9	5.2	2.3	ED	
43	14	68	3.2	3.7	2.9	ED	
44	12	57				ED	
45	14	84	3.2	3.3	4.4	ED	
46	14	53	3.9	2.4	3.3	ED	
47	15	96				ED	
48	15	57				ED	TMR
49	14	42	1.0	2.6	K.4	ED	TMR

[a]Abbreviations are as follows: ED-emotionally disturbed; EMR-educable mentally retarded; SH-speech handicapped; TMR-trainable mentally retarded

Table 3

Student Population by Sex and Ethnicity

	Black				White				Hispanics			
	Males		Females		Males		Females		Males		Females	
	N	%	N	%	N	%	N	%	N	%	N	%
Hillcrest North	25	29%	5	6%	17	19%	1	1%	1	1%	0	0%
H. C. Withers	14	16%	3	3%	11	13%	3	3%	7	8%	0	0%
Totals	39	45%	8	9%	28	32%	4	5%	8	9%	0	0%

2. Were the components of behavior management, parental involvement, and curriculum and therapeutic interventions implemented as specified?

Behavior Management. Criteria for student movement between levels of the program were found during the 1978-1979 school year to be inconsistent across project sites and inconsistent with stated project goals and objectives. The management team determined that a manual to be authored by the secondary site program manager and made available to all project staff would alleviate this problem. The manual was not completed in time to be used during the 1979-1980 school year, and at this writing the secondary site project manager is no longer with the District.

Results of classroom observations during the 1979-1980 school year showed that token economies were initially employed in Level I classrooms as specified in the original grant. Level I classrooms were initially divided into two phases with distinctive criteria for advancement. However, management learned that the distinction was not functional and the Phase I - Phase II procedures were abandoned about mid-way through the school year. Also, the token economy was completely phased out of Level I classrooms at the secondary site by March 1980. Techniques and strategies employed within the token economies varied across classrooms and across project sites. A point system was employed in Level II classrooms as specified. A point system was also employed in Level I classrooms at the secondary site during the last quarter of the regular school year.

Supportive facilities (time-out and crisis rooms) were present and used as specified in most cases. Specified construction of the crisis rooms at the elementary site was not completed

until June 1980. Also, since the time-out room which housed the crisis room components was also used as the staff office, students were sometimes placed in crisis rooms for general time-out purposes.

Behavioral and academic criteria for student advancement through the levels were generally subjective on the part of management and staff as the completion of the "Behavior Management Manual" had yet to be realized.

Parental Involvement. Parental involvement was encouraged and supported on the part of the visiting teacher. One visiting teacher resigned in December 1979 and another was hired in January 1980. Records indicated that emphasis on parental involvement occurred at the elementary site. Since January 1980, the visiting teacher made 80 home visits, 20 child observations, and 196 telephone contacts. She participated in 75 Admission, Review and Dismissal (ARD) team meetings, 24 supervisor conferences, 32 parent/guardian conferences, 14 principal/assistant principal conferences, 9 child conferences, 27 teacher conferences, 12 conferences with Health Services, 13 conferences with the Department of Human Resources, 17 clerical conferences, and spent an estimated travel time of 35 hours. Optimal parental involvement efforts were precluded by a lack of time and additional personnel.

Curriculum Intervention. Although the severity of problematic behaviors restricted academic instruction, there was no systematic approach to curriculum intervention. Multidisciplinary development of Individualized Educational Programs (IEPs) was not realized and the IEPs were incomplete. Assignments were reportedly given to appropriate students in accordance with the District's baseline objectives whenever possible.

Funds for the staffing of a full-time educational diagnostician were not granted for the 1979-1980 school year. The project management team decided to use the existing District structure in an effort to involve the services of an educational diagnostician. Although the responsible team member for the elementary site maintained a more consistent contact with staff members than the responsible team member for the secondary site, an on-going and definitive assessment and review of students' academic progress was not realized.

Therapeutic Intervention: Overall goals stipulated in the original grant were established along with counseling schedules. The data indicated that the general goals were being sought but the established schedules were not strictly followed. Also, systematic procedures for identifying specific counseling objectives and a rating scale to assess the appropriateness and effect of the counseling provided were not developed as directed by the management team.

3. What was the extent of student movement from a restrictive to a least restrictive environment?

Five (6%) students (three elementary and two secondary) were advanced to Level III of the program. Two were staffed out during the later part of the year and three were staffed out at the end of the year. One secondary student attended the Multiple Careers Magnet Center (MCMC) for one-half of the school day. Student status as of May 29, 1980, is shown in Table 4.

Eleven (29%) of the elementary students advanced from Level I to Level II. Six (16%) students who participated in the program during the 1978-1979 school year began the 1979-1980 school year on Level II. One of these students later advanced to Level III and was normalized at another school.

Nine (18%) of the secondary students advanced from Level I to Level II. Eight (16%) 1978-1979 participants began the 1979-1980 school year on Level II and two (4%) were advanced to Level III and normalized.

Since movement to a "least restrictive environment" was dependent on a continuum of alternative placement available beyond the project, an assessment of model success was not definitive. According to management team consensus, the reponsibilites for ensuring appropriate opportunities for mainstreaming activities through placement decisions remained with the Admissions, Review and Dismissal Committee.

4. To what extent did changes occur in frequency of disruptive behaviors, disciplinary referrals, and suspensions of project students.

At the elementary site, overall misconduct and behaviors necessitating time-out intervention decreased as indicated by behavioral charting devices and the Time-Out Log. Average daily misconducts and time-outs dropped from 53.9 and 11.0, respectively, in the second six-week period to 40.3 and 9.6, respectively, in the sixth six-week period as can be seen in Table 5. Individually, seven (18%) students demonstrated an appreciable reduction in disruptive behaviors.

Overall, there was no appreciable reduction of disruptive behaviors and time-outs at the secondary site as indicated by the Time-Out Log and the number of "breaks" earned. This data is tabulated in Table 6. Individually, the data indicated a noticeable reduction in behaviors necessitating time-out interventions and an increase in the number of breaks earned for four (8%) students. These four students were among the fourteen students who were enrolled all six periods.

Table 4

Student Disposition - May 29, 1980

	Returning to Program		Other DISD Sp. Ed.		DISD Reg. Ed.		State School		State Hosp.		Juvenile Home		Adult Detention		Dropped Out		Moved out of DISD	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Hillcrest North	21	24%	2	2%	5	6%	2	2%	4	5%	1	1%	1	1%	13	15%		
H. C. Withers	16	18%	14	16%	4	5%			1	1%							3	3%
Totals	37	43%	16	18%	9	10%	2	2%	5	6%	1	1%	1	1%	13	15%	3	3%

Table 5

H. C. Withers

Average Daily Enrollment (ADE), Attendance (ADA), Misconducts (ADM) and Time-Out (ADTO) Per Six-Week Period

Six-week Period	ADE	ADA	ADM	ADTO
First[a]	21	84%	19.3	3.3
Second	27	87%	52.9	11.0
Third	30	88%	66.0	10.8
Fourth	30	83%	62.5	13.5
Fifth	28	86%	44.0	8.7
Sixth	30	87%	40.3	9.6

[a]Data available for 19 days of this period.

Table 6

Hillcrest North

Average Daily Enrollment (ADE), Attendance (ADA), Time-Out (ADTO) and Breaks (ADB) Per 6-Week Period

Six-week Period	ADE	ADA	ADTO	ADB
First	16	70%	1.8	18
Second	21	63%	1.8	24
Third	22	64%	4.9	31
Fourth	18	69%	6.4	34
Fifth	21	66%	5.2	32
Sixth	22	68%	8.5	32

The data indicated that there was an increase in disruptive behaviors on the part of three elementary students and six secondary students. One of these three elementary students was restaffed during the fifth six-week period only and was placed in Level II of the program upon returning. Three of the six aforementioned secondary students were advanced to Level II of the program. These data are shown in Table 7 for the elementary students and in Table 8 for the secondary students.

For the most part, discipline was addressed within the behavioral management component of the program and thus disciplinary referrals to the principal's office were negated.

There were no suspensions at the elementary site. Ten students were involved in twenty suspensions at the secondary site. This compares to eighteen suspensions involving eleven students during the 1978-1979 school year. Some behaviors necessitated the involvement of juvenile authorities. One student of delinquent status received court-ordered placement in a juvenile home outside of Dallas and six students were arrested for various crimes including burglary, theft, major school disruption, sexual offenses, and destruction of property.

5. To what extent did changes occur in the rate of truancy and dropouts among project students?

With one exception, truancy was not a problem at the elementary site where the overall average daily attendance was 86% for the year. One student was frequently absent without permission and had an overall attendance rate of 59%. Three other elementary students who experienced poor attendance during the first six-week period increased their attendance considerably for the second six-week period and it remained good for the remainder of the year.

At the secondary site, truancy presented a major problem. The overall attendance rate was 67%. The attendance rate for six students continued to decline until they eventually dropped out or, in one case, restaffed. Three other students with poor attendance during their first period of enrollment also dropped out (see Table 8). Entry and exit behavioral factors are presented for the elementary and secondary sites in Tables 7 and 8, respectively.

Of the eighty-seven students who enrolled in the program, thirteen (15%) secondary students dropped out or quit attending. This compares to five (9%) drop-outs during the 1978-1979 school year.

Table 7

H. C. Withers
Selected Student Behavioral Factors: Program Level, Percent Attendance (%A), Average Daily Time-outs (ADTO), and Average Daily Misconducts (ADM) at Entry and at Exit.

Student	Days Enrolled	Entry				Exit				Disposition
		Level	%A	ADTO	ADM	Level	%A	ADTO	ADM	
1	109	I	50%	.07	2.10	I	95%	.19	.52	Returning - Level I
2	61	I	100%	1.30	4.70	I	58%	1.40	5.30	Returning - Level I
3[a]	14	II	0%	—	—	II	—	—	—	Other DISD Sp. Ed.
4	150	I	100%	.25	.75	I	83%	.67	4.10	SEED - Secondary
5	175	I	93%	.33	2.10	I	100%	.28	1.10	Returning - Level I
6	31	I	45%	.00	3.20	I	66%	.00	5.20	Other DISD Sp. Ed.
7	175	I	83%	.04	.08	II	90%	.00	.00	Other DISD Sp. Ed.
8	100	II	100%	.00	.21	II	100%	.42	2.20	Garland ISD
9	175	I	93%	.19	1.30	I	93%	.78	4.10	Returning - Level I
10	101	I	86%	.08	3.00	I	83%	.58	3.00	Returning - Level I
11	165	I	100%	.00	1.10	II	100%	.14	1.10	Returning - Level II
12	80	I	97%	.00	1.20	I	90%	.11	2.60	Other DISD Sp. Ed.
13	37	I	71%	1.50	9.50	I	0%	.00	.00	State Hospital
14	175	I	86%	.32	.96	II	97%	.04	.12	Returning - Level II
15	43	I	93%	.00	.31	I	97%	.11	.54	Returning - Level I
16	146	I	32%	.00	1.60	II	100%	.48	.79	Returning - Level II
17	174	I	54%	.07	2.10	I	66%	.05	1.10	Returning - Level I
18	175	I	52%	.20	1.10	I	72%	.14	2.10	Other DISD Sp. Ed.
19	175	I	100%	.24	.90	III	100%	.17	.17	Normalized
20	142	I	100%	.00	1.70	II	97%	.21	.32	Normalized
21	117	II	90%	.04	.19	III	97%	.00	.00	Normalized
22	173	I	93%	.52	2.00	II	83%	.96	1.30	SEED - Secondary
23	175	II	97%	.71	1.30	II	93%	.70	1.40	SEED - Secondary
24	141	I	60%	2.00	5.00	I	97%	1.00	3.40	SEED - Secondary
25	175	I	97%	.71	2.20	I	97%	.79	3.50	Returning - Level I
26[a]	11	I	90%	.10	.60	I	—	—	—	Returning - Level I
27	175	I	93%	.30	.59	II	79%	.00	.52	Returning - Level II
28	137	I	81%	.88	2.80	I	55%	.63	3.90	Transferred out of DISD
29	148	I	100%	1.00	4.00	I	79%	.91	4.30	Returning - Level I
30	78	I	90%	.00	.28	II	100%	.00	.17	Other DISD Sp. Ed.
31	175	I	90%	.00	.69	II	100%	.03	.58	Returning - Level II
32	168	I	50%	.73	1.50	I	66%	.26	2.00	Other DISD Sp. Ed.
33	175	II	100%	.59	.93	III	100%	.31	1.20	Normalized
34	172	I	88%	.04	.96	II	69%	.25	1.00	Other DISD Sp. Ed.
35	152	II	67%	.00	1.30	II	100%	.17	.83	Tansferred out of DISD
36[a]	19	I	68%	1.20	3.10	I	—	—	—	Other DISD Sp. Ed.
37	102	I	100%	.42	2.00	I	93%	.33	2.30	SEED - Secondary
38	175	II	100%	.21	.52	II	97%	.11	.11	Returning - Level II

[a]Student enrolled less than 30 days.

Table 8

Hillcrest North

Student Behavioral Factors: Program Level, Percent Attendance (%A), Average Daily Time-outs (ADTO) and Average Daily Breaks (ADB) at Entry and at Exit

Student	Days Enrolled	Entry				Exit				Disposition
		Level	%A	ADTO	ADM	Level	%A	ADTO	ADM	
1	64	I	100%	.00	3.80	I	90%	.96	3.10	Returning - Level I
2	126	I	60%	.30	.00	I	39%	.55	1.50	Dropped Out
3	173	II	96%	.00	1.00	II	86%	.00	1.50	Returning - Level II
4	120	I	100%	.00	3.30	II	45%	.00	1.10	Returning - Level II
5	173	II	30%	.00	2.10	II	7%	.50	2.00	Dropped Out
6	121	I	100%	.20	2.80	I	57%	.38	1.90	Dropped Out
7	44	I	100%	2.30	1.20	I	66%	2.90	2.30	Returning - Level I
8	49	II	29%	.00	.00	II	0%	.00	.00	Dropped Out
9	81	I	100%	.40	.60	II	44%	.17	.83	State Hospital
10	160	I	85%	.58	2.30	II	69%	.45	2.00	Returning - Level II
11	51	I	13%	.00	2.70	I	59%	.29	3.50	Returning - Level I
12[a]	28	I	57%	1.40	2.80	I	--	--	--	Returning - Level I
13	169	I	96%	.00	1.80	II	97%	00	1.50	Returning - Level II
14	37	I	100%	.00	3.00	I	29%	1.50	3.00	Returning - Level I
15	174	II	50%	.00	.86	II	0%	.00	.00	Adult Detention
16	58	I	39%	.00	2.40	I	0%	.00	.00	Dropped Out
17[a]	23	I	41%	.86	1.60	I	3%	.00	.00	DISD Regular Ed.
18	56	II	100%	.00	.62	III	96%	.00	.23	Normalized
19	175	I	83%	.25	1.70	II	79%	.57	1.30	State School
20	175	I	93%	.04	1.70	II	69%	.30	1.90	Dropped Out
21	153	I	43%	.33	1.00	I	13%	.75	.50	Dropped Out
22	153	I	14%	.00	.60	I	0%	.00	.00	Dropped Out
23[a]	25	I	67%	.00	2.50	I	47%	.33	1.80	State Hospital
24	94	I	71%	.00	4.00	I	76%	1.20	2.60	Returning - Level I
25[a]	16	I	100%	.50	1.00	I	36%	.00	1.40	DISD Regular Ed.
26	49	I	65%	.08	2.90	II	3%	.00	6.00	State Hospital
27	45	I	70%	.71	2.00	I	0%	.00	.00	Dropped Out
28	82	II	97%	.07	1.50	II	42%	.00	.83	Other DISD Sp. Ed.
29	174	I	100%	.21	2.10	II	66%	.00	1.40	State School
30	67	I	41%	.00	1.80	I	11%	.00	2.00	DISD Regular Ed.
31	95	I	57%	.69	1.40	I	62%	.39	2.30	State Hospital
32	35	II	21%	.20	1.80	II	0%	.00	.00	Other DISD Sp. Ed.
33	66	I	75%	.83	3.00	II	93%	.00	2.60	Returning - Level
34	62	I	100%	.00	3.50	I	0%	.00	.00	Dropped Out
35	140	I	83%	.50	1.10	I	64%	1.40	2.90	State School
36[a]	29	I	100%	.48	2.50	I	100%	.00	.00	Returning - Level I
37[a]	23	II	57%	.00	.54	III	--	--	--	Normalized
38	175	I	100%	.00	2.10	II	100%	.00	1.70	Returning - Level II
39	112	I	68%	.00	2.30	I	69%	.60	2.70	Returning - Level I
40	155	II	78%	.00	.71	II	7%	.00	.50	Dropped Out

[a]Student enrolled less than 30 days.

Table 8

Hillcrest North
(Cont'd.)

Student Behavioral Factors: Program Level, Percent Attendance (%A), Average Daily Time-outs (ADTO) and Average Daily Breaks (ADB) at Entry and at Exit

Student	Days Enrolled	Entry				Exit				Disposition
		Level	%A	ADTO	ADB	Level	%A	ADTO	ADB	
41[a]	20	I	55%	.82	1.60	I	--	--	--	Returning - Level I
42	145	I	75%	.29	1.60	I	38%	.63	1.40	Dropped Out
43	57	I	74%	.18	1.60	I	48%	.00	1.60	Juvenile Home
44	127	I	91%	.45	2.00	I	72%	.76	2.10	Returning - Level
45[a]	16	I	88%	.00	3.10	I	--	--	--	Returning - Level I
46[a]	29	I	62%	.50	1.60	I	--	--	--	Returning - Level I
47[a]	17	I	41%	.00	3.10	I	--	--	--	Returning - Level I
48	174	I	11%	.00	.00	I	0%	.00	.00	Dropped Out
49	174	I	86%	.25	1.30	I	100%	.69	1.90	Returning - Level I

[a]Student enrolled less than 30 days.

6. To what extent did project students display changes in self-concept?

The Piers-Harris Children's Self-Concept Scale was selected and approved by the Management Team for use in the assessment of changes in the way students felt about themselves. The instrument was ordered through appropriate departments but was not administered to program students. In order to meet the requirements of testing for special education students, the scale had to be administered individually by professional staff from the Department of Pupil Personnel Services or project psychologists.

7. To what extent did project students exhibit changes in academic achievement?

The administration of standardized achievement tests to project students was to occur at entry and exit according to project guidelines. The Wide Range Achievement Test (WRAT) was accepted by the management team as a temporary solution to the problem of providing appropriate participation of project students in the District's system-wide testing program, and was to be administered at least in the fall and again in the spring of each school year. The professional staff at the elementary site met this guideline with greater success than did the secondary site staff. At the elementary site, results from the WRAT were available for 23 students who participated in the project during the 1979-1980 school year. Results were available for seven students at the secondary site.

The data presented in Table 9 show an average gain of one year one montn in reading for project students at the elementary site as measured by the difference between the fall and spring administrations of the WRAT for the 1979-1980 school year. The average gain in spelling was eight months and in math the gain was four months.

Results of the administration of the WRAT to secondary students for spring 1980 were not available. Scores for the 1978-1979 school year and the fall administration for the 1979-1980 school year, although limited, are shown in Table 10.

8. What was the reaction of parents and non-project teachers, staff members and administrators to the project?

Respondents at the elementary site unanimously indicated an overall positive reaction to Project SEED. At the secondary site, a majority (67%) indicated an overall positive reaction to the program whereas during the 1978-1979 school year, secondary level respondents had mixed reactions. A majority

Table 9

Grade Equivalence Scores for Withers Students
1978-1980 as Measured by Wide Range
Achievement Test (WRAT)

Student	Date of Birth	Scale Scores[a] Reading N=8 1978	Reading N=23 1979	Reading N=21 1980	Spelling N=8 1978	Spelling N=23 1979	Spelling N=21 1980	Math N=8 1978	Math N=23 1979	Math N=21 1980
2	6-21-70	—	5.0	6.5	--	3.9	4.3	—	2.8	3.9
3	10-16-68	3.1	4.1	6.0	2.5	3.2	5.0	2.4	3.2	3.9
4	11-22-71	--	1.2	1.7	—	1.1	1.5	--	1.2	1.7
5	1-26-67	2.7	2.8	4.8	2.6	3.7	4.5	3.6	3.9	3.9
6	10-24-67	1.5	1.5	3.0	1.3	1.5	2.4	2.8	2.6	3.0
7	7-19-71	--	1.4	2.6	--	1.4	1.5	--	2.4	2.3
8	8- 6-69	—	4.1	5.3	--	2.7	3.3	—	3.6	3.7
9	10-11-67	1.6	10.9	10.0	2.0	6.5	7.5	2.1	3.9	3.3
10	12 -8-67	—	1.5	3.1	--	1.6	2.1	--	2.2	2.7
11	8 -2-68	--	10.9	7.9	--	7.2	7.0	--	4.2	4.5
13	12 -3-68	1.4	2.3	3.4	1.3	2.0	2.6	1.2	2.1	2.6
15	6-15-71	—	1.1	2.2	—	1.0	1.7	—	2.8	3.1
16	3-15-66	3.5	5.0	--	3.7	4.0	--	2.3	2.3	--
17	11- 8-76	—	1.5	2.4	--	PK.5	2.1	—	1.0	1.4
18	9-19-71	Kg.7	1.3	2.2	Kg.6	1.0	1.0	Kg.7	Kg.6	Kg.7
19	3-11-68		2.3	3.1	--	2.3	2.7	3.2	3.2	--
21	9-11-71	--	1.3	2.6	--	Kg.8	3.1	--	Kg.5	1.4
23	5-13-73	--	Kg.2	1.6	--	PK.4	1.3	--	PK.4	Kg.7
24	4-30-68	—	2.0	3.3	--	1.7	2.4	—	3.0	3.6
25	2-27-71	—	3.8	5.9	--	2.9	4.5	--	2.1	2.7
28	3-17-64	—	4.7	7.2	—	3.7	4.5	--	3.0	3.9
29	12-18-69	--	1.6	1.5	--	2.2	1.5	—	3.3	3.1
Mean Gain			1.7	0.8		1.0	0.8		0.4	0.4

[a]Scores are from administration of WRAT in the fall 1978, fall 1979, and spring 1980. Abbreviations are as follows: KG-kindergarten; PK-pre-kindergarten

Table 10

Grade Equivalence Scores for Hillcrest Students 1978-1980 as Measured by Wide Range Achievement Test (WRAT)

Student	Date of Birth	Scale Scores[b] Reading N=5 1978	Reading N=5 1979	Reading N=4 1980	Spelling N=6 1978	Spelling N=5 1979	Spelling N=4 1980	Math N=6 1978	Math N=5 1979	Math N=3 1980
4	8-7-65	2.2	--	3.2	2.6	--	3.0	3.4	--	5.3
6	4-19-62	NA[b]	7.5	—	8.1	8.7	—	6.1	--	
14	11-22-63	4.6	--	4.8	4.6	--	5.2	3.9	--	5.7
16	3-17-64	--	4.2	4.8	--	4.3	5.2	--	4.4	NA
20	11- 4-64	1.2	1.3	1.7	1.3	2.2	2.2	1.6	2.3	2.9
24	12-22-63	6 5	8.7	—	4.3	5.5	—	8.0	7.4	—
26	12-17-62	1.2	1.3	--	1.3	2.6	--	1.0	2.3	--
Total	Range	0.1-2.2	0.4-0.6		0.6-1.3	0.0-0.8		-0.5-1.3	0.6-0.6	
Gains	Men	0.7	0.5		0.9	0.4		0.4	0.6	

[a]Only students who had been admininstered the WRAT at least twice are included

[b]Administrations include fall, 1978, spring 1979, fall 1979; no test were administered spring 1980.

(53%) of the secondary site respondents indicated a perceived need for programmatic changes. Although there was no consensus as to what changes were needed, respondents perceived a need for a separate building facility, more structure and directive management procedures, and a more compatible staff. Problems for regular students and personnel included high noise levels, physical and verbal harassment, and general confusion concerning special privileges afforded program students.

The Parent Questionnaire was mailed to 49 parents and guardians. Responses were few, totaling 12 (24%). Of those who did respond, nine (75%) indicated an overall positive reaction to their child's participation in the program, as can be seen in Table 11. While nine (75%) respondents indicated no change in their attitudes toward DISD schools, eight (67%) indicated that they perceived their child received better special education services in the SEED Program. Eight (67%) respondents indicated that their child benaved better at home and at school since enrolling in the program. Six (50%) respondents indicated that their child's overall progress remained about the same while five (42%) felt that their child's overall progress was better than before.

9. To what extent did teachers and aides exhibit changes in skills, knowledge, and attitudes?

Responses to the Participatory Survey administered during 1979-1980 were compared to responses from 1978-1979. In reference to job satisfaction, a smaller percentage (91% compared to 71%) of respondents perceived too much desparity between ideals of education and actual practice, while the percentage perceiving teaching methods to be too prescribed increased (from 0% to 28%).

While the percentage (90%) of respondents indicating that salaries were insufficient remained about the same, more overall job frustration was indicated as an increased percentage of respondents perceived that there was not enough helpful, intelligent supervision, that there was unfairness in teachers' assignments, that parents were too uncooperative, and that there was disunity, lack of morale, and dissatisfaction among their peers.

An increased percentage of respondents indicated that they felt qualified to teach ED children, more confident in their ability to discipline ED children, and more effective on the job. On the other hand, fewer respondents perceived that they were making a valuable contribution to ED children and to society as a whole.

10. What evidence was there that information about Project SEED, its goals and its objectives were being disseminated?

Within the District, knowledge and awareness of Project SEED seemed limited to those who had a "need to know." There were

Table 11

Responses to Parental Questionnaire
N = 12

Item		Response Categories		
		Better in Past	About the Same	Better since SEED Program
Perception of DISD special education services	N	0	4	8
	%	0%	33%	67%
		Before SEED Program		After SEED Program
Total parental contacts with school unrelated to discipline	N	62		74
		Better in Past	About the Same	Better since SEED Program
Parental attitude toward school	N	0	9	3
	%	0%	75%	25%
		Better than Before	About the Same	Worse than Before
Perception of child's behavior at school since SEED Program	N	8	4	0
	%	67%	33%	0%
		Better than Before	About the Same	Worse than Before
Perception of child's overall progress	N	5	6	1
	%	42%	50%	8%
		Positive	Neutral	Negative
Parental attitude/ reaction to child's participation in SEED Program	N	9	2	1
	%	73%	17%	10%

14 requests for information from educational institutions outside of DISD. Project management videotaped some program activities and is in the process of preparing these materials along with pictorial slides and printed materials for dissemination purposes.

Additional Information:

Hawkins, D. E. and Rogers, A. M. Evaluation of the Structured Environment for the Emotionally Disturbed (SEED) Project (SP79-430-31-08) Dallas Independent School District, Department of Research, Evaluation, and Information Systems, June 1979.

Summary and Recommendations

The special education computerized data base was an integral part of special education program operation, and development and use of the data base had increased from 1978-79. In 1979-80 there was expanded application of input and retrieval of information via video-display terminals, and there was a 19% increase in the number of student maintenance transactions. The data base was seen as evolving to provide computer applications to special education management processes. There was evidence that data base activities were critical in meeting the needs of management, and continuation of the data base function is encouraged strongly.

The special education program as a whole may have served the appropriate numbers of children, with the probable exception of the East Oak Cliff Subdistrict where the service rate (5.8%) was below the total District rate of 8.2%. The findings suggested that the mandate of Public Law 94-142 for a free appropriate public education for all handicapped children was not being implemented in the East Oak Cliff Subdistrict. The Southeast Subdistrict served 10.2%, and the procedures used in the subdistrict may provide basis for initial study. Referral and appraisal procedures in the East Oak Cliff Subdistrict should be reviewed to identify ways in which to extend special education services to unserved handicapped children.

There was no evidence of overrepresentation of minorities in the special education program. A previous trend toward overrepresentation of Black secondary students in special education was not evident, but the percent of White elementary students during the past five years was consistently about 10% more than in the total District.

In the past several years, the District has initiated efforts to provide early intervention for handicapped children. Most notable have been Project KIDS and Project Zero Reject (the child find effort), and state guidelines have changed also to permit intervention for younger children. The early interventon efforts to date apparently have increased the proportion of handicapped children served before the fourth grade from 11% to 19%. This was a noteworthy and significant outcome since intervention must take place very early in the child's life in order to realize maximum benefit.

The District's child find system to locate unserved, handicapped children identified a total number of referrals consistent with previous years, but there were indications that older unserved, handicapped children might not have been identified, since 90% of child find referrals were five years old or younger. The average time from referral to placement was 16 weeks, and this figure had increased during each of the past five years. The results indicated a need to review and possibly to redesign the child find system in order to improve the referral-placement timeline and to study the effectiveness of the system in terms of older children.

The KIDS model program for early intervention for handicapped children appeared to continue its effectiveness in promoting developmental progress, and there was evidence that both parents and teachers generally responded well to the model design and that the model could be implemented fairly easily across different teachers and schools. However, there were problems in implementation of classroom materials and procedures in the school-based setting of the project, and it was thought that more content-specific staff development and technical assistance would have remediated the observed problems. Difficulties in

implementation probably resulted from the decision to expand model replication sites beyond the numbers originally specified.

The parenting component of the KIDS model was not implemented satisfactorily. The number of participating parents was small relative to the total number of children (57 parents compared to 381 children), and the wide divergence across participating parents in terms of the degree of participation suggested disproportionate allocation of parenting resources. Project management should commit considerable effort toward implementing the parenting compo- n 1980-81.

Implementation of Project SEED (Structured Environment for the Emotionally Dist-rb-d) was somewhat improved from 1978-79. During 1979-80 the project management team agreed upon procedures to improve implementation, but there was little follow-up in carrying out most team decisions. Among these were development of a project procedures manual, selection and procurement of student progress measures, development of counseling procedures, and development of a systematic approach to curriculum intervention. In short, the project continued to experience major implementation problems, which were more acute at the secondary school site.

Selected students in Project SEED exhibited improvement in classroom behavior and progressed to less restrictive educational settings. Observed improvement in students was more evident at the elementary school site, and there was more evidence of the expected project implementation at the elementary site. The student population presented severe behavior management and instructional problems. This was especially evident at the secondary site where the overall attendance rate was only 67% (as compared to 86% at the elementary site) and where several students were involved in criminal behavior.

Efforts like Project SEED address a major need in special education programming in large, urban school districts, and it is recommended that management efforts be increased to the level necessary to bring about successful project implementation. Project SEED has addressed an extremely difficult-to-serve population, and management efforts are likely to be above and beyond those required in the more usual special education program.

The Hyperkinesis Screening Project was a coopeative effort by several departments and was successful in developing procedures for screening for hyperkinetic (i.e., hyperactive) behavior. Classroom teachers were determined to be professionals preferred over school nurses in rating behavior, and a preferred behavior rating scale was selected. Additionally, normative cutoff scores were developed for classification of students as being at risk for hyperkinesis. It is recommended that the Connors behavior rating scale, completed by the child's classroom teacher and interpreted according to local normative data, be the appropriate response to requests from local physicians regarding observations of student behavior.

Acknowledgement

The studies reported in this document could not have been completed without the excellent cooperation and assistance of the administrators and professional staff in the Dallas Independent School District, especially that provided by Dr. Allen R. Sullivan, Student Services and Dr. Ruth M. Turner, Exceptional Children and Youth Services.